

FULL-TIME STUDENTS

Introduction

This document presents summary findings for full-time students across Wales, indicating where there are differences and particularities compared to overall results. For quantitative results, differences are significant at the 95% confidence level, meaning that there is only a 5% possibility that the difference has occurred by chance; a commonly accepted confidence level. All differences are statistically significant unless stated otherwise. There is a separate report showing results across groups. The title of the overall report is: 'Evaluation of information resources' (produced by BMG Research on behalf of PHW). 24 full-time students took part in the quantitative survey and four students took part in a qualitative focus group. All full-time students that took part in the focus group were aged 16 to 24. For the survey, the vast majority of students were also aged 16 to 24 (22); however, 2 full-time students that took part in the survey were older (one aged 45 to 54 and another one aged 55 to 64). Given the relatively low base sizes for the full-time students group as a whole, findings should be interpreted with caution. Fieldwork took place between December 2022 and February 2023. Further information about sampling and methodology can be found on the main report cited above.

Recommendations and key take outs for this group are marked in **bold**.

Awareness of publicity about immunisation

In line with overall results, the vast majority of students (88%) say that they have seen or heard something about immunisations for people in the past 12 months. Those who had seen or heard information about vaccination say that it was mostly related to COVID-19 (81%) and flu (48%), with the proportion of students saying that they have seen information about the flu vaccine being lower than average (48%, compared to 62% overall; this difference, however, is not statistically significant given the low base size for this group). This is likely to reflect the fact that this group is less likely than other groups to be eligible for flu vaccines.

Students are less likely than average to say that the information about vaccination that they have seen or heard in the past 12 months was in favour of vaccinations (62%, compared to 80% overall) and more likely than average to say that the information was against vaccination (14%, compared to 4% overall) or a mixture of information in favour and against vaccinations (14%, compared to 7% overall). These differences are not statistically significant given the low base size for this group.

Doctors, nurses or other healthcare professionals are the most common channel for students to receive information about vaccination in the past 12 months; with 29% of those who have seen/heard information on vaccination saying that healthcare professionals provided this information to them, a proportion which is in line with the average result (cf. 32% overall). This is followed by newspapers (24%, compared to 15% overall), the NHS website (19%, compared to 18% overall), family/friends/colleagues (19%, compared to 15% overall), and social media (19%, compared to 22% overall). In contrast, none of the students that took part in the survey say that they have seen or heard information about vaccinations on magazines, WhatsApp or from health visitors.

Key take outs:

- **Recommended channels for reaching out to students: healthcare professionals, newspapers, social media.**
- **Less effective channels for reaching out to students: magazines, WhatsApp, health visitors.**

A sizeable proportion of students have encountered misinformation about vaccinations, with 25% saying that they have seen or heard something in the past 12 months that would make them worried or concerned about having vaccinations (compared to 21% overall). This is in line with the overall result.

Key take out:

- **One in four students have seen or heard misinformation about vaccines, which suggests that some ‘myth-busting’ style information resources about vaccinations may be beneficial for this group.**

Awareness of vaccination programme

Awareness of the vaccination programme in Wales among students is lower than average, with awareness of most vaccines being lower than average among this group. The below differences, however, are not statistically significant given the low base size for this group.

Vaccines students are less likely than average to be aware of: flu (42%, compared to 76% overall), MMR (38%, compared to 68% overall), 4-in-1 pre-school booster (diphtheria, polio, tetanus, whooping cough (pertussis)) (29%, compared to 53% overall), Tetanus, diphtheria, and polio Td/IPV (Teenage booster or 3 in 1) (29%, compared to 53% overall), Hepatitis B (29%, compared to 38% overall), HPV vaccine (Cervical cancer, head and neck cancer, genital cancer and genital warts) (29%, compared to 40% overall), travel vaccinations (29%, compared to 40% overall), Tuberculosis (BCG) (21%, compared to 40% overall), 6-in-1/DTaP/IPV/Hib/HepB (diphtheria, hepatitis B, Haemophilus influenzae, polio, tetanus, whooping cough (pertussis)) (17%, compared to 43% overall), MenB (meningitis B) (17%, compared to 35% overall), Hib/MenC (Haemophilus influenzae, meningitis C) (17%, compared to 28% overall), Pertussis (whooping cough) vaccine (17%, compared to 27% overall), Shingles/herpes zoster vaccine (17%, compared to 35% overall), and Pneumococcal (PCV) vaccine (13%, compared to 29% overall).

In contrast, awareness of the COVID-19 vaccine is high, in line with the average result (83%, compared to 84% overall).

The general low awareness of the vaccination programme among students was also captured via the qualitative focus group:

“I don’t think anyone knows what the MENACWY etc. is... hard to remember”. Student

Key take out:

- **With the exception of the COVID-19 vaccine, overall awareness of the national vaccination programme in Wales could improve among students.**

Attitudes towards vaccinations

Students are more likely than average to say that several of the diseases the Welsh vaccine programme protects against are not serious: flu (54% of students say that this disease is not serious, compared to 40% overall), COVID-19 (50%, compared to 28% overall), Shingles/herpes zoster (46%, compared to 25% overall), Measles (not German) (42%, compared to 29% overall), Pertussis/whooping cough (33%, compared to 22% overall), Hepatitis (21%, compared to 11% overall), Tuberculosis (17%, compared to 6% overall), and Pneumonia (17%, compared to 5% overall).

Nonetheless, students are more likely than average to say that all vaccines are a lower risk to them than the diseases they protect from (83%, compared to 73% overall).

Additionally, in line with overall results, most students agree that: vaccines work (88%, compared to 86%), think vaccines are safe (83%, compared to 84% overall), vaccines are properly tested (75%, compared to 79% overall), they trust vaccines (88%, compared to 83% overall), it is normal for people their age to get vaccinated (75%, compared to 81% overall), getting vaccinated is the right thing to do for themselves (92%, compared to 82% overall) and for society (79%, compared to 82% overall).

These positive views about vaccines and why they work were also brought up by the students who took part in the qualitative focus group:

“I think they're good because they help prevent people going to hospital when they've actually caught the flu or something”. Student

“I think [the COVID vaccine] is having a positive effect in terms of less hospitalisations and even friends who have had COVID have less symptoms after having the vaccine”. Student

Nonetheless, this group are more likely to agree that they are concerned about side effects (63% agree, compared to 46% overall) and the ingredients of vaccines (46%, compared to 34% overall). This likely reflects the fact that students are more likely than other groups to have encountered misinformation about vaccinations.

Key take outs:

- **Attitudes towards vaccinations among students are mixed. While trust in vaccines is high, this group are more likely to see most diseases that the Welsh vaccine programme protects from as not serious. Therefore, information resources for this group should outline the severity of diseases that the vaccination programme protects against so as to encourage uptake.**
- **Sizeable proportions of students appear to have some concerns about the side effects and the ingredients of vaccines, likely reflecting the fact that this group are more likely to have encountered misinformation compared to other groups. Consequently, information resources for students should contain information to reassure them about the side effects and ingredients of vaccines.**

Access to information and decision-making

Students are less likely than average to feel knowledgeable about vaccinations. 71% of students agree that they know how vaccinations work (compared to 81% overall), 71% say that they have had enough information to make an informed decision about whether or not to have each of the vaccinations they have been offered so far (compared to 86% overall), and 75% know where to find information about vaccination (compared to 85% overall). These differences are not statistically significant given the low base size for this group. These lower levels of knowledge about vaccines were also reflected in the qualitative focus group, with some students mentioning that for the COVID vaccine, information resources were provided post vaccination, which did not allow for informed decision-making:

“I remember specifically for the COVID vaccine you were given the information after you had it. Given a leaflet, couldn't really make an informed decision beforehand”. Student

When it comes to the sources of information used to find out about vaccinations, the most common sources of information for students are: doctors, nurses and other healthcare professionals (38%), the NHS website (33%), and the PHW website (29%). These results are in line with the average result.

In terms of decision-making, students are less likely than average to say that they automatically have all the immunisations when they are due/offered (38%, compared to 57% overall) and more likely to say that they normally have all the vaccines offered to them but that they like to check information before having them (38%, compared to 24% overall). 17% say they weigh up the pros and cons of different immunisations before they decide whether or not to have them (in line with the average result: 11%).

Key take outs:

- **Students are less likely than average to feel knowledgeable about vaccinations and more likely to say that they like to check information about vaccines (as opposed to making automatic decisions). Information resources for students should, therefore, include information about vaccinations and what they protect against as well as highlighting the benefits of vaccines to encourage uptake.**
- **Recommended channels for reaching out to students: healthcare professionals, NHS website, PHW website.**

Vaccine uptake, barriers and motivations

When asked whether they had refused or delayed any vaccines offered to them, students are more likely than average to say that they have had all the vaccinations offered to them so far (83%, compared to 73% overall) and less likely to say that they have refused one or more vaccinations (8%, compared to 17%). 4% say that they have delayed one or more vaccinations, in line with the average result.

In line with overall results, protection of oneself is the most prominent motivation among students to get vaccinated.

When it comes to barriers to vaccine uptake; a lack of trust, a perception that vaccines are not necessary and having had an illness and recovered are the most commonly cited reasons for students to refuse vaccinations, in line with overall results.

Key take out:

- **Claimed vaccine uptake is higher than average among students, with protection of oneself being the most prominent motivation to get vaccinated (in line with average results). Information resources for this group should therefore draw on protection as a motivator to encourage vaccination uptake/draw attention to information resources.**
- **Information resources for students should build trust in vaccines and justify their necessity (despite the possibility of recovering from an illness) to address barriers to uptake among this group.**

Awareness and views of PHW publicity

Awareness of PHW publicity among students is in line with the average result (38%, compared to 41% overall). Awareness of the *Mae Brechu yn achub bywydau/Vaccination saves lives* logo is also in line with the overall result (54%, compared to 39% overall).

GP surgeries (33%) and vaccination centres (22%) are the most common places where students have seen PHW publicity, in line with overall results. Nonetheless, when asked (at the qualitative focus group) about the best places to convey vaccination information to students, social media, schools and university were most commonly cited as effective channels by students while healthcare settings were not mentioned.

"I do think social media is quite good as they can target a large audience.... but it would have to depend on who it was posted by. If it was anyone other than NHS/PHW I'd ignore it".

Student

"Schools would be effective. If you get people early on, in their younger years, being more engaged in their health and vaccines as part of that, I think it sets a good habit for the future. Then as people become more autonomous with their bodies after 18, moving away from home...a wider Uni campaign e.g. in bathrooms". Student

Views of PHW publicity are in line with average results, with 78% being satisfied with the materials overall, 78% agreeing that the information is clear, 78% being satisfied with the amount of information on the materials, 78% agreeing that the materials are relevant to them, and 67% positively rating the design/layout.

Further insights in relation to views of PHW publicity were provided in the qualitative focus group. Related to the finding highlighted in a previous sub-section that students feel less knowledgeable about vaccinations than other groups, this group would like information resources to contain information about vaccines, including what they protect against and why one should have each vaccine:

"I get they don't want to overload it with info but I don't know what these vaccines do, why I'd get them, and if I had them. [...] It mentions signs and symptoms but doesn't say what they are". Student [University social media post]

As seen across other groups, there is a preference for short and concise information resources, with links and QR codes to further information.

"I agree...I think I would actually read this, as childish as it is... if it was in a waiting room somewhere I would read it. It's fun, even for my age group". Student [COVID vaccine cartoon resource]

"Some information is missing [...] it would be good to put a QR code or just say 'more information here'". Student [COVID vaccine cartoon resource]

"It's concise and comprehensive...it covers what/why/how to get it/how to get more information. It would inform you enough to actually make that decision yourself, which is important to foster in yourself at that age...it develops responsibility, informed consent". Student [Easy Read HPV leaflet]

"It is easy and gets the point across but it is still eleven pages.... It's a double-edged sword to get the information in while keeping it short and engaging". Student [Easy Read HPV leaflet]

Students also mentioned that it is important to use appropriate language that does not sound childish.

"Considering that they're using words like aspirin, condom etc. to use the word 'private parts' is so infantile for a medical leaflet and seems a bit silly... It depends on the age group but if

you're reading this as a teenager [it] might make you feel quite childish/patronised. HPV itself isn't a childish thing to discuss so why?". Student [Easy Read HPV leaflet]

Key take outs:

- **Information resources for students should be short and concise (as for other groups), with links and QR codes to find out more.**

Key take outs:

- **Information resources for students should contain information about vaccinations, including what the vaccine protects from, why people should have them and side effects, since students are less knowledgeable about vaccines than other groups and are more likely to prefer to check information before getting vaccines.**
- **Information resources for students should contain age-appropriate language – more research with students may be needed so as to ensure information resources do not contain language that can be perceived as childish.**
- **Recommended channels for reaching out to students: social media, school, university.**