

Can trauma cards help people access healthcare?

Contents

Contents.....	1
Endorsements.....	2
Executive summary.....	3
Headline findings.....	4
Background.....	5
What did we do?.....	7
What did we find?.....	8
Conclusions.....	17
Recommendations.....	18
Appendix 1: survey questions.....	19
Appendix 2: calculating population figures.....	22
Appendix 3: Trauma cards costs (Healthwatch Essex).....	23

Endorsements

"As nationally recognised experts in trauma-informed practice we were proud to support Healthwatch Essex in the piloting of their trauma cards. We have had much positive feedback about the impact they are having. We are really pleased to see that this research from Healthwatch England reveals how powerful a national trauma cards pilot could be in supporting people affected by trauma in accessing health and care services."

Sue Penna, (CEO, Rock Pool)

"We welcome Healthwatch England's valuable new research, which demonstrates how severely trauma can affect people's ability to access healthcare. We have found that many of the women who come to us for help after traumatic birth avoid medical appointments such as cervical screening because they find them too traumatising. We would like to see the NHS do much more to support people with a history of trauma through, for example, training in trauma-informed care and schemes such as trauma cards."

Kim Thomas (CEO, Birth Trauma Association)

"The MASIC Foundation supports further exploration of a national trauma card scheme. Many women affected by maternal birth injuries report anxiety around healthcare appointments, particularly gynae exams and cervical smears. They are also affected by PTSD from traumatic births, and often find it difficult to engage with HCPs when they need follow-up care, or have flashbacks to the birth when visiting hospital for treatment. Having a trauma card scheme available would be beneficial to our community. "

MASIC

Executive summary

There are millions of people in England currently experiencing trauma, and millions more who have previously experienced it. For many, **experience of trauma can act as a barrier to seeking health and care services.**

In 2022, Healthwatch Essex piloted trauma cards – wallet-sized cards that a person with trauma can give to a healthcare professional. The cards explain that the holder has experience of trauma, and link to further resources to help provide sensitive, appropriate care.

The pilot was hugely successful, showing how a simple intervention can make it easier for people who have been through trauma to get the care they need.

In October 2024, Healthwatch England commissioned YouGov to run a nationally representative poll of people from England to understand how trauma cards might benefit people more widely.

The research asked about whether respondents had experienced trauma, how this had affected their experiences of care, and whether they would be likely to use a trauma card if available.

We found that **trauma is widespread, with 59% having experienced trauma at some point in their lives.** The number is higher still for some demographic groups, including women, autistic people, and people with ADHD.

Trauma can prevent people from receiving care, with nearly half the respondents having avoided using health and care services because of their trauma at least once. Over a third of people had never told a healthcare professional about their trauma, and more than a third of those who had felt uncomfortable doing so.

Avoiding care is detrimental to both the individual and to the health and care system, with unaddressed needs likely to store up greater problems further down the line. This highlights the importance of tools like trauma cards, which encourage people to access services when they need them.

Over two in five (43%) of respondents who were currently experiencing trauma said they would be likely to use a trauma card if these were available for free.

In this report, we explain our findings in further detail, and make recommendations to improve care for people with experience of trauma. These include:

- The Department of Health & Social Care and NHS England to roll out a national pilot of a trauma card similar to Healthwatch Essex's local pilot
- Investment in a communications campaign to raise awareness of the pilot among the public and health and care staff

- Improved training on trauma-informed care for frontline health and care professionals

Headline findings

Following work by Healthwatch Essex developing a trauma card, Healthwatch England investigated the national need. The report sets out the following findings:

- 59% of adults in England say they have experienced trauma at some point, which equates to about 27 million people.
- Around two thirds (67%) of women and around half (51%) of men say they have experienced trauma at some point.
- 39% of those who have experienced trauma say they think that their trauma has negatively impacted their experience of health and care services.
- Nearly a fifth (18%) of people who have experienced trauma say they 'often' or 'fairly' often avoid services because of their trauma. This equates to around 4.9 million people.
- Many people who have experienced trauma do not disclose that fact to medical professionals. 37% of people who have experienced trauma have never told a medical professional about it.
- For those who do tell a medical professional about it, it can be an uncomfortable experience. Over a third (35%) of those who have told a medical professional about their trauma found it uncomfortable, with the figure being even higher for women at 42%.
- The main barrier to disclosing experiences of trauma seems to be lack of confidence and comfort talking about it to medical professionals.
- Over two in five (43%) of those currently experiencing trauma would be likely to use a trauma card, and nearly a third (30%) of those who have experienced trauma in the past would be likely to use one. This equates to about 1.6 million people and about 7.4 million people respectively.

Background

The UK Trauma Council defines trauma as: 'the way that some distressing events are so extreme or intense that they overwhelm a person's ability to cope, resulting in lasting negative impact'.¹ People who have experienced trauma may be reluctant to engage with health and care services.

We have heard cases of this at Healthwatch England, especially where the trauma has been caused by a medical experience. For example, one woman with complex post-traumatic stress disorder² (PTSD) told us that she has avoided cervical screenings for years because of a traumatic experience at 19.

'It's been maybe seven years since that experience and I haven't been for a cervical screening since. I can still picture that room and what it felt like. Because of that experience, I have lied to doctors and said that I've had screenings since whenever they have asked. I have proactively avoided gynaecological procedures wherever possible.'

Story shared with Healthwatch England

The same woman also told us that she recently had non-gynaecological tests, the results of which point towards a gynaecological issue, possibly including cervical cancer. This shows the very real issues that can occur for people with trauma when they feel unable to engage with healthcare services.

In 2022, Healthwatch Essex launched a 'trauma card'. The card came out of a long-term co-production initiative led by members of Healthwatch Essex's Trauma Ambassador Group. The cards are designed to be handed to a healthcare professional when a cardholder is in a triggering situation. The card has a QR code that, when scanned, provides more information to the healthcare professional about what the individual is experiencing and how best to help them.³

This empowers individuals who have experienced trauma to communicate more effectively with healthcare professionals and enables them to get the support they need.

¹ [Trauma](#), UK Trauma Council, no date

² Post-traumatic stress disorder (PTSD) is 'a mental health condition caused by very stressful, frightening or distressing events' ([NHS](#), no date). Complex PTSD is when someone has some of the symptoms of PTSD, and also has problems with managing emotions and having relationships ([NHS](#), no date).

³ More information on the trauma cards can be found at traumahub.uk



Healthwatch Essex launched the trauma cards on 1 November 2022, provided free to anyone who would like one. The demand was considerably higher than they expected and by March 2024, they had distributed over 15,000 trauma cards.

Healthwatch Essex's [evaluation](#) of its initial pilot set out very encouraging preliminary evidence that the use of a trauma card in accessing healthcare services has been empowering for recipients, with all respondents to the evaluation stating the card was effective in facilitating engagement with professionals.⁴ Feedback from professionals has also been positive.

'I find it very helpful – because of the anxiety I just shut down and can't talk. Knowing I've got the card means I'm less likely to be triggered. It's like that comfort blanket. It takes that stress off you.'

Trauma card user, quoted in Healthwatch Essex's evaluation⁵

Healthwatch England believes this project by Healthwatch Essex has huge potential. The significant uptake in Essex demonstrates the potential value of trauma cards, which could improve experiences for trauma survivors across the country when using health and care services. We therefore decided to further

⁴ [Healthwatch Essex Trauma Card Pilot Evaluation](#), Healthwatch Essex and University of Essex, 2024

⁵ Page 5, [Healthwatch Essex Trauma Card Pilot Evaluation](#), Healthwatch Essex and University of Essex, 2024

investigate how many people in England might find a trauma card helpful.

What did we do?

To show the potential national demand for trauma cards, we commissioned YouGov to run a short survey on people's experiences of trauma.

All figures, unless otherwise stated, are from YouGov Plc. The total sample size was 3571 England adults. Fieldwork was undertaken between 3 - 4 October 2024. The survey was carried out online. The figures have been weighted and are representative of all England adults (aged 18+).

Trauma is a complex and sensitive topic, which can make it challenging to research, especially through polling. People have differing understandings of trauma, so the wording used to describe it can impact the results.

However, we felt that this challenge was not insurmountable. Even without a universal definition, the results would still provide an indication of the prevalence and impact of trauma across England. Healthwatch Essex also kindly gave us feedback on our polling questions, so we were able to draw on their experience in this area on how to best ask questions on this topic.

To supplement the polling, we reviewed our own data from both the national Healthwatch network and our website's webform on the experiences of health and care of people with trauma.

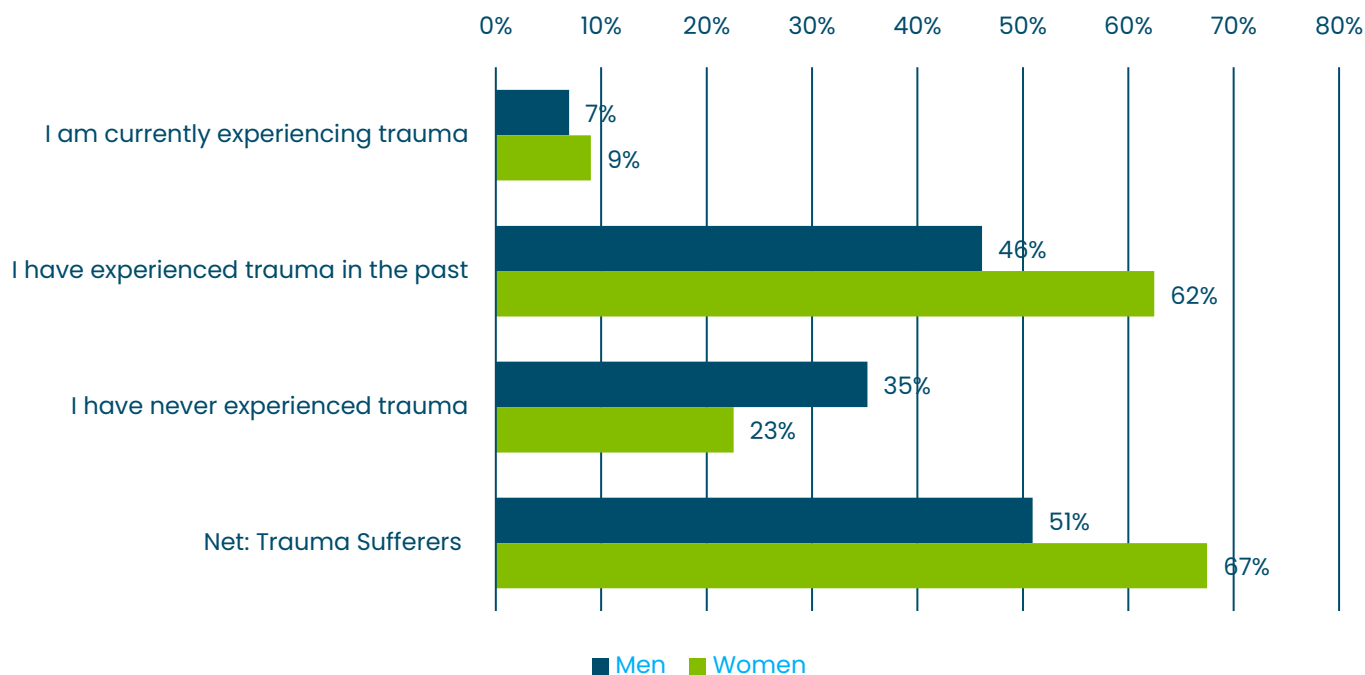
What did we find?

How many people experience trauma?

Our first goal was to simply establish how many people in England experience trauma. We asked both whether people are currently experiencing trauma or have in the past.⁶ We found that 59% of adults have experienced trauma at some point, with 8% currently experiencing it.

As this is a nationally representative poll of England, we can extrapolate these figures and estimate that around 27 million adults have at some point experienced trauma, with around 3.7 million adults currently experiencing trauma.⁷

Within that, we noted a gender difference, with more women experiencing trauma than men. Two thirds of women have experienced trauma, compared to half of men.



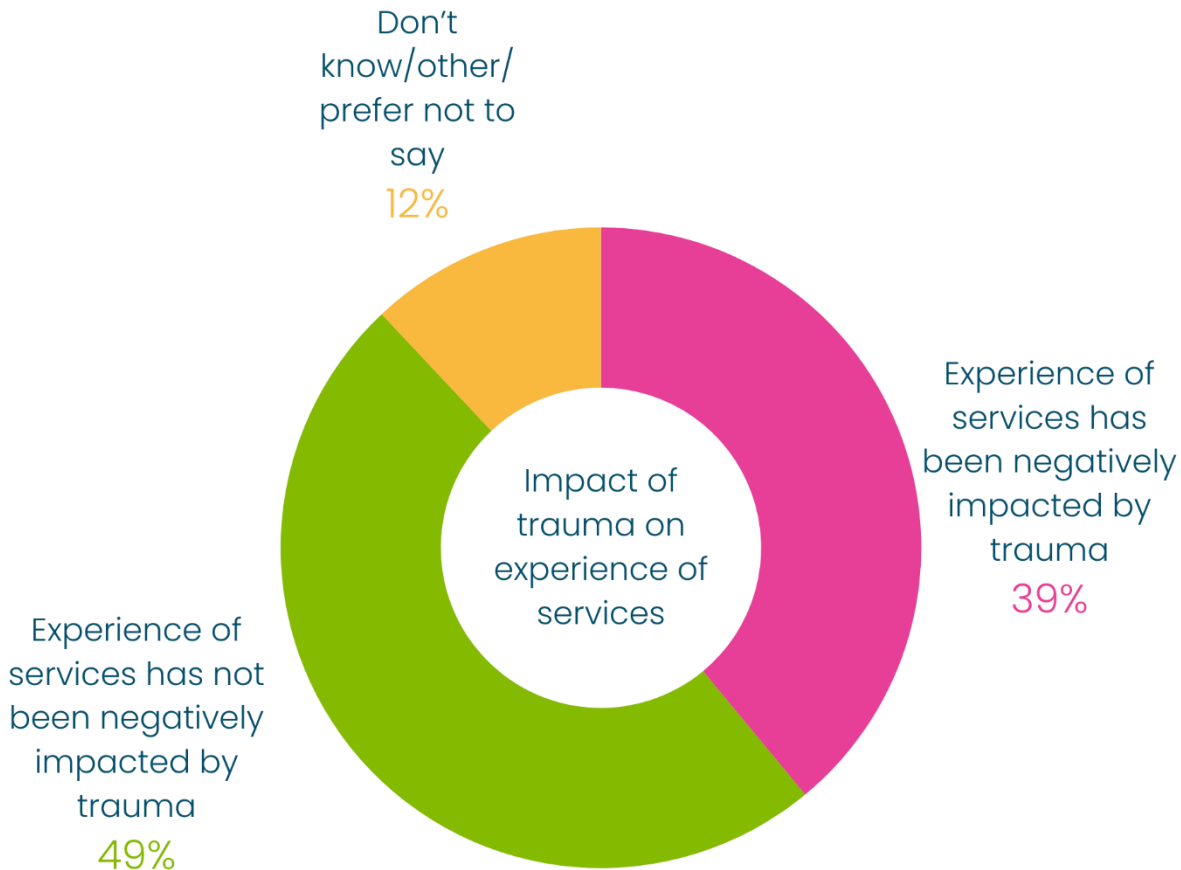
We also found that autistic people and people with attention deficit hyperactivity disorder (ADHD) or attention deficit disorder (ADD) experience trauma in quite significantly larger numbers. 75% of autistic people reported experiencing trauma, and 87% of people with ADHD or ADD.

⁶ For full details of the questions in our poll, please see the Appendix 1.

⁷ Please see Appendix 2 for details of how we made these calculations.

How does trauma affect use and experiences of health services?

We asked those people who said they have experienced trauma whether it has ever negatively impacted their experience of health services. Just under half (49%) said their trauma has never negatively impacted their experience of services, while almost two in five (39%) said their trauma has negatively impacted their experience.



We know from our previous question that around 27 million people in England have experienced trauma at some point. The above figures suggest that, of these, around 10.5 million people may have had their experiences of health and care services negatively impacted by their trauma.⁸

We have heard examples from members of the public of how their experience of services has been negatively impacted by their trauma.

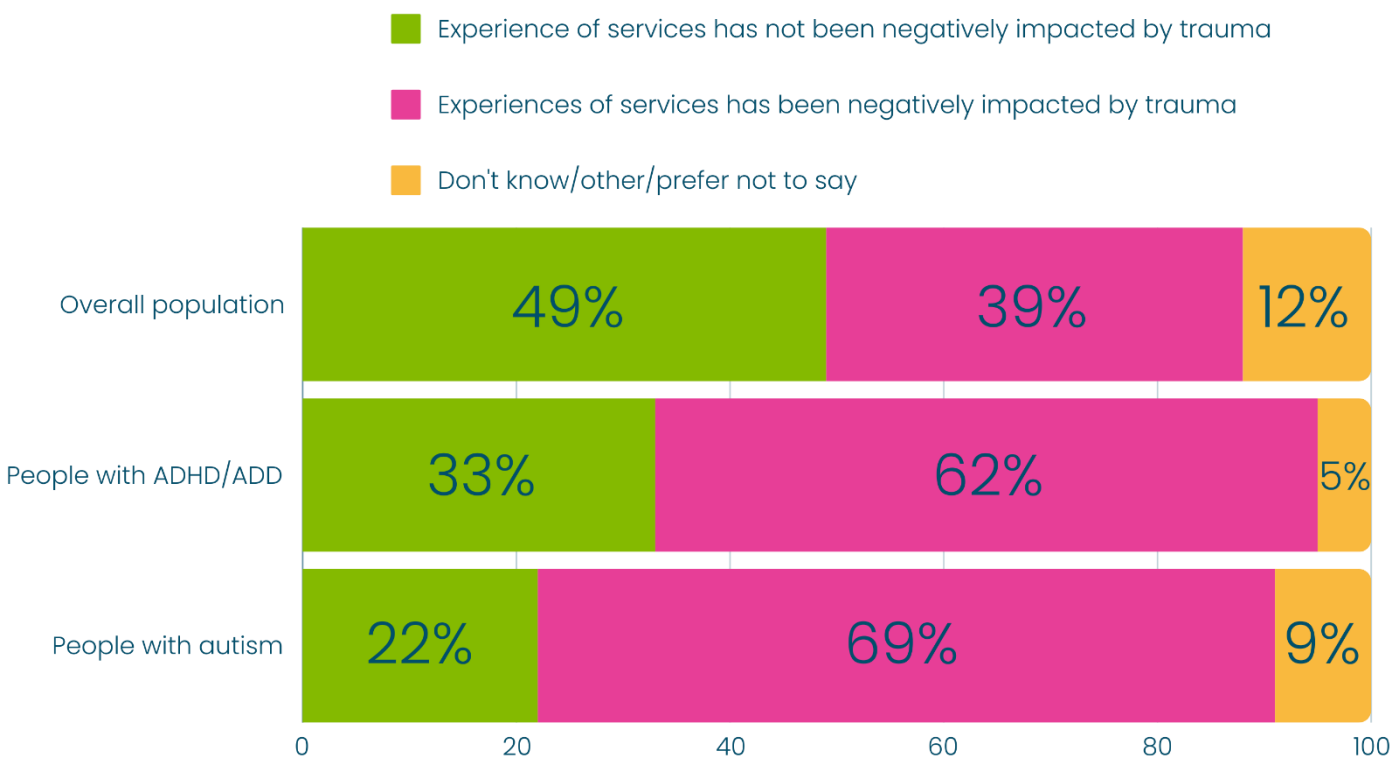
Your question was about whether trauma history has impacted care. Yes. I had a history of sexual violence...a male psychiatrist decided I should have a male therapist to 'discuss' this trauma, and when I tried to refuse this he told me if I didn't go along with it he'd section me in hospital. Absolutely...bonkers. On what planet can someone do therapeutic work

⁸ Please see Appendix 2 for details of how we made these calculations.

when you have not been able to consent and are living in chronic unsafety in an enforced trauma bond. [I'd] started [treatment for] depression, and ultimately left the treatment having developed PTSD and then dissociative identity disorder as a direct result of the treatment[.]

Story shared with Healthwatch England

We saw in our previous question that experiencing trauma is markedly more common in autistic people and people with ADHD/ADD. Responses to this question suggest that, in addition to higher prevalence, a higher proportion of those people find their trauma negatively impacts their experiences of services.



Do people with trauma avoid services because of their trauma?

Our results tell us that many people with trauma have negative experiences of health and care services. We also asked people with trauma whether they had ever avoided using services altogether because of their trauma.

Fewer than half (45%) of people who have experienced trauma said they have never avoided a service because of their trauma. Meanwhile, 30% said they 'rarely' or 'sometimes' avoid services, while 18% said they 'fairly often' or 'very often' avoid services.

Given the proportion of people who report that they have experienced trauma, this indicates there could be around 4.9 million people in England who have often avoided accessing services because of their trauma.⁹

No awareness of/recognition of trauma responses. I couldn't stop shaking and it was just ignored. I have a massive trauma history and have resigned myself to avoiding all treatment now as [it's] just unbearable.

Story shared with Healthwatch England

Again, we found figures to be notably different for people with ADHD/ADD and autistic people who have experienced trauma. 41% of autistic people and 37% of people with ADHD/ADD say they 'very often' or 'fairly often' avoid services because of their trauma. This is much higher than the overall figure of 18%.

The impact of avoiding care

In this research, we only looked at the impact of trauma directly, so we did not investigate the impact of avoiding using NHS services.

However, the story below offers an example of the potential negative implications of avoiding appointments. She was traumatised by cervical screening and has avoided all gynaecological appointments for several years because of that. She is now dealing with some test results that point to a gynaecological issue that may have gone undetected because she had avoided appointments.

...some test results have come back pointing towards a likelihood of [gynaecological] issues. It could be a mycobacterial issue but it could also be a sign of otherwise "quiet cancers", including cervical. And now, as a woman who has complex PTSD from her upbringing, and a negative clinical experience with that nurse, I am falling apart with anxiety because I want to proactively request ruling out the cancers while also being deeply aware that I haven't had a cervical screening in so long, and what if it is cervical cancer, what if I haven't been aware of it because I've been so scared to go have it done because of that experience.

Story shared with Healthwatch England

⁹ Please see Appendix 2 for details of how we made these calculations.

Other research has demonstrated the negative impact on people of not having healthcare appointments. Co-op Health looked at the avoidance of GP appointments in general and found that 23% of those who avoided appointments said it resulted in their symptoms becoming much worse, with 22% saying their illness had lasted longer than it should have.¹⁰

An article in the British Journal of General Practice stated that ‘failing to attend appointments potentially leaves already vulnerable patients living with unmet need, and delays appropriate treatment and diagnosis.’ Similarly, a literature review of non-attendance of appointments found a significant association of non-attendance and poor health outcomes.¹¹

This underlines how concerning it is that nearly a fifth of people with trauma said they often avoid services.

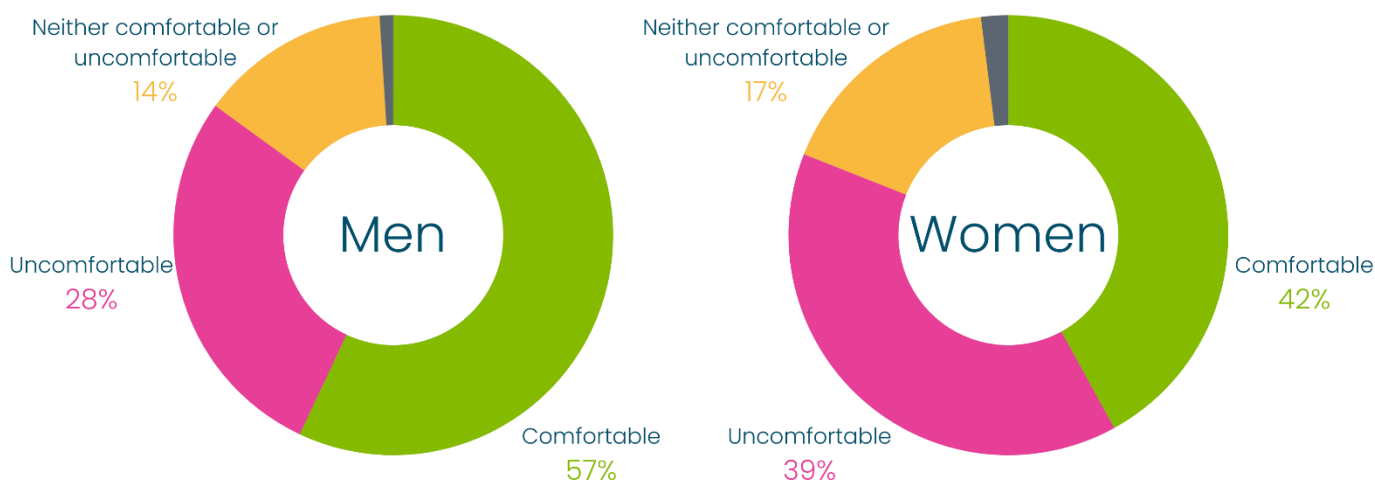
Why do some people with trauma avoid services?

Our data suggests that a key driver for people with trauma avoiding services is that a lot of people with trauma do not feel comfortable speaking to a medical professional about it. For example, we found that 37% of people who have experienced trauma have never told a medical professional about their trauma.

The figures were higher for older people, so there may be an ongoing shift in cultural attitudes. However, even in 18- to 24-year-olds, over a quarter (26%) of people with trauma have never told a medical professional about it.

For those who do speak to a medical professional, it can be an uncomfortable experience. Around half (48%) of those who said that they have told a medical professional about their trauma said they felt comfortable doing this, but 35% said they felt uncomfortable doing it.

For those that have told a medical professional about their trauma, how comfortable did they find it?



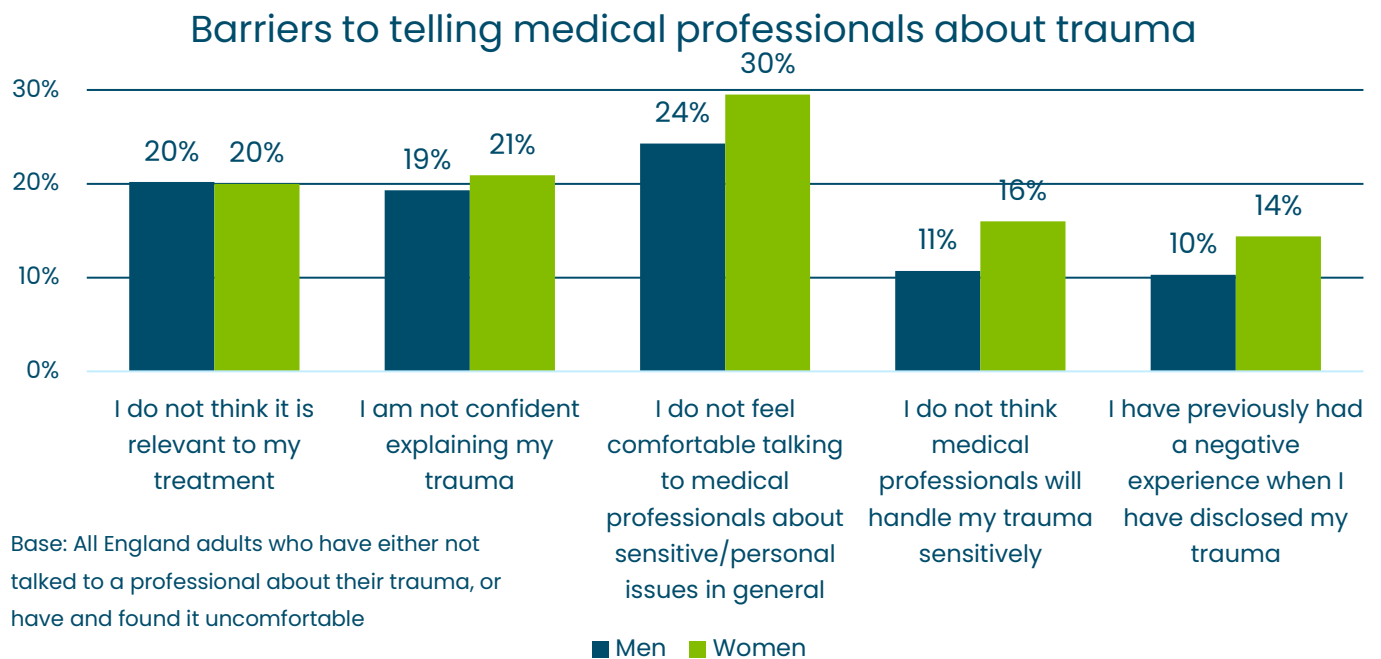
¹⁰ [The Doctor Dodgers: Two thirds of UK adults put off seeing their GP](#), Co-Op, 2019

¹¹ [The changing face of missed appointments](#), British Journal of General Practice, 2023

Within this, there is a significant difference between men and women. Over half (57%) of men felt comfortable telling a medical professional about their trauma, compared to 42% of women. Meanwhile, 28% of men felt uncomfortable doing it, compared to 39% of women.

We also asked people who have never told a medical professional about their trauma and those who have but found it uncomfortable about the barriers to speaking to medical professionals about trauma. Responses point to the same issue: some people are not comfortable talking to medical professionals.

However, other issues are also apparent, such as a lack of confidence explaining trauma, lack of confidence in medical professionals handling it sensitively, and previous negative experiences of disclosing trauma.



Some of the gender difference in comfort talking to a medical professional may be explained by the higher figures for women not thinking medical professionals will handle trauma sensitively and previous negative experiences when disclosing trauma.

This was many years ago now, but after a violent and traumatic rape I was referred to a sexual health clinic to get checked for any sexually transmitted diseases. When I was there I explained the reason for my visit was due to a rape. The nurse then said "well did you say no?".

Even 7ish years later I still think about that awful statement she made, the awful victim blaming, how she made me feel like it was all my fault. I was

in too much of a bad state to even report her, so I also feel guilty that's she's probably out there somewhere further hurting rape victims.

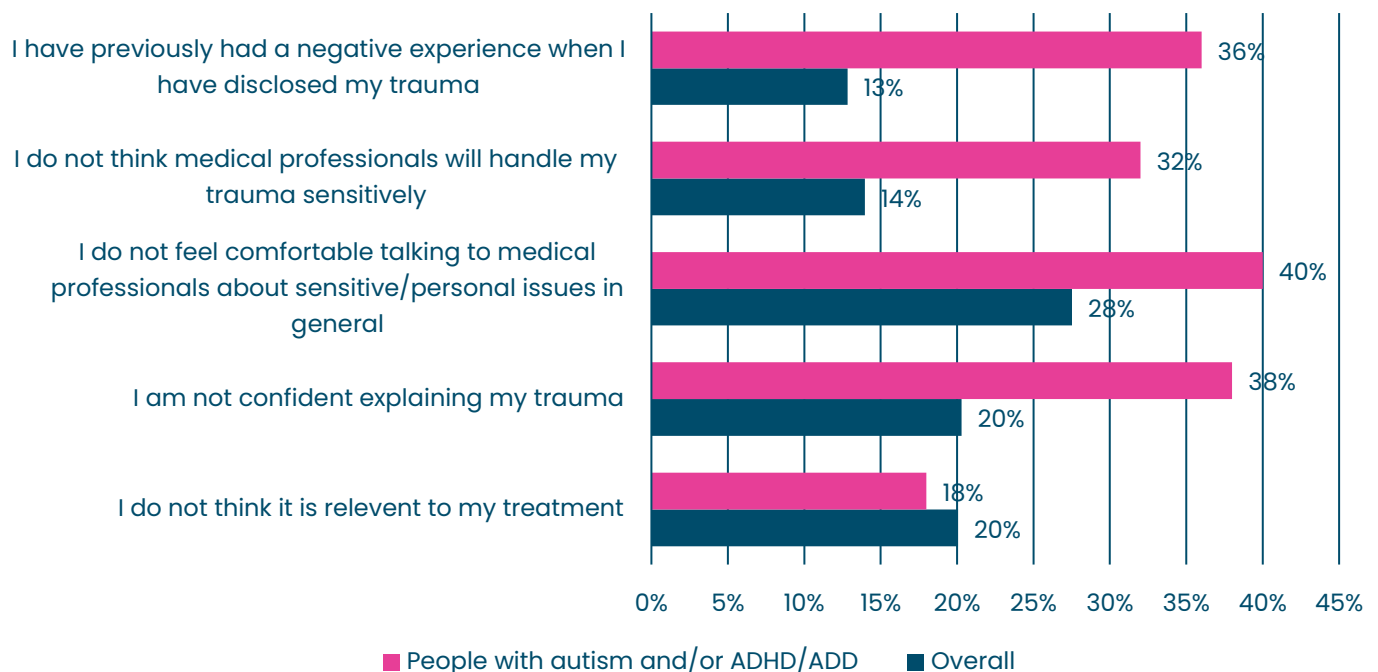
Story shared with Healthwatch England

We found again that people who have ADHD/ADD and/or are autistic had different experiences. For the results of this question, we have combined these two groups of people.¹²

Our data suggests that compared to everyone else, more people with autism and/or ADHD who have either not spoken to a medical professional or have felt uncomfortable doing so:

- Have had a previous negative experience of disclosing trauma
- Do not think medical professionals will handle their trauma sensitively
- Do not feel comfortable talking to medical professionals in general
- Do not feel confident explaining their trauma

Barriers to telling medical professionals about trauma in people with autism and/or ADHD/ADD



¹² This question was only answered by people who have found telling a medical professional about their trauma uncomfortable or who have never done so. The proportion of this group who also have autism or ADHD/ADD is too small to give a reportable sample size. However, by combining the two groups we can create a large enough sample size to report.

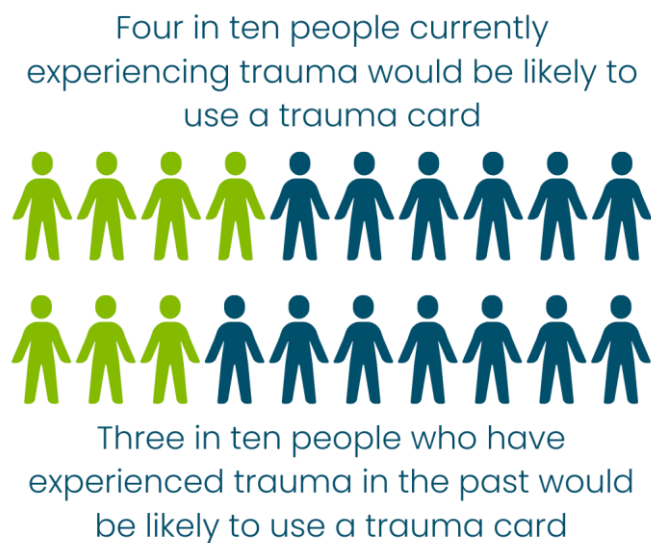
Would people use a trauma card?

Our data suggests that there are a lot of people living with trauma who struggle with the things that a trauma card is designed to support. Our findings show that some people with trauma have found talking to a medical professional about it uncomfortable, and we know that many have never told a medical professional about their trauma.

We also know that many in this latter group are not confident explaining their trauma, do not feel comfortable talking about sensitive issues in general, and do not have confidence in medical professionals handling their trauma sensitively.

These are all things with which a trauma card can help. Healthwatch Essex's trauma card has been very well received by people who have used it. The final question in our survey therefore asked respondents how likely they would be to use a trauma card if it were available.

We found that over two in five (43%) of respondents currently experiencing trauma would be likely to use a trauma card, while almost a third (30%) of those who have experienced trauma in the past said the same. If we again use the figures on our initial question on prevalence, this indicates that there may be about 1.6 million people who currently have trauma and would be likely to use a trauma card, and another 7.4 million people who have had trauma in the past and would be likely to use a trauma card.¹³



Of course, our survey question is both brief and hypothetical about something that respondents have probably not heard of before. If rolled out nationally, trauma cards would be offered to people with a more thorough explanation. This means that the above figures are likely to be underestimates of the true uptake if trauma cards were made available.

¹³ Please see Appendix 2 for details of how we made these calculations.

Nevertheless, the above findings, and the results of Healthwatch Essex's evaluation, provide evidence that there would be significant interest in trauma cards nationally among people who have experienced trauma.

Beyond the headline figures, our data suggests trauma cards may be of particular interest to those who avoid engaging with services due to their trauma. Almost half (45%) of people who told us they very often avoid services due to their trauma said they would be likely to use a trauma card, while just over half (51%) of people who fairly often avoid services said the same.

We also found that 53% of autistic people said they would be likely to use one, and 47% of those with ADHD/ADD.

Conclusions

Healthwatch Essex's trauma card initiative has been very successful in supporting individuals who have experienced trauma. The high levels of uptake point to the appetite for the card and the results of our national research underline this.

- There are millions of people in England currently experiencing trauma, and millions more who have previously experienced it. Together, these people may constitute over half the population of England. Women and people with autism and/or ADHD/ADD are more likely to experience trauma.
- For many, their experiences of using health and care services are negatively impacted by their trauma. This is particularly true for people with autism and/or ADHD/ADD.
- Our polling results indicate that nearly five million people may have often avoided health and care services because of their trauma.
- Many people with trauma find it uncomfortable to tell medical professionals about their trauma. This is particularly true of women, with fewer than half of women who have experienced trauma saying they have felt comfortable when doing so.
- For those who feel uncomfortable speaking to a medical professional about their trauma, or who have never done so, key issues are: lack of confidence explaining their trauma, a belief their trauma will not be treated sensitively, not feeling comfortable talking about sensitive issues with medical professionals, and previous negative experiences when disclosing trauma.
- Our findings indicate a strong appetite among people who experience trauma for a trauma card, particularly among those who avoid services because of their trauma.

Recommendations

Healthwatch England is calling for:

A national pilot of a trauma card

Healthwatch Essex's successful trauma card project offers a 'ready-made' solution to some of the issues people with trauma have when engaging with health and care services.

We are therefore calling for the Department of Health & Social Care (DHSC) and NHS England to support a national evaluative pilot of a trauma card initiative, allowing anyone across England to order a trauma card and have it delivered to them for free, along with an information sheet that clearly explains how and when a trauma card can be used.

The rollout of this pilot should be undertaken through a process of co-production with people with lived experience of trauma. An evaluative pilot could allow for greater feedback about the reception of these cards by health professionals as well as trauma survivors.

Longer term, NHS England should consider if the pilot results support the addition of a digital card, through a reformed NHS App or smartphone wallets.

National awareness raising among public and staff

The rollout of a national trauma card pilot should be accompanied by investment in a communications campaign. This should raise awareness among both the public and health and care staff of trauma cards, including their purpose and how they can be used.

Improved training on trauma-informed care for frontline health and care professionals

Our research demonstrates both a need and a desire for trauma cards to be more widely used. However, the deeply worrying numbers of people who have experienced trauma having negative healthcare experiences mean that more needs to be done to ensure that all professionals are well equipped to give high quality treatment.

NHS England should consider whether the Scottish National Trauma Training programme model could be adapted for and implemented in England.

Appendix 1: survey questions

Questions from our survey with YouGov

1. For the following question, by trauma we mean when you experience very stressful, frightening or distressing events that are difficult to cope with, or out of your control. It could be one incident, or an ongoing event that happens over a long period of time. Trauma can cause lasting adverse effects and can limit our ability to function and achieve mental, physical, social, emotional or spiritual wellbeing. Which, if any, of the following statements apply to you? (Please select all that apply)
 - a. I am currently experiencing trauma
 - b. I have experienced trauma in the past
 - c. I have never experienced trauma
 - d. Don't know
 - e. Prefer not to say

2. For the following question by "negatively impacted", we mean experiences where the quality or effectiveness of health or care services was harmed, reduced, or worsened due to your trauma. This could mean that your trauma affected your ability to receive, engage with or benefit from these services in some way than usual. Thinking about your experience of any health or care service...Which, if any, of the following health or care service experiences for you are/were negatively impacted because of your trauma? (Please select all that apply. If your experience of health or care services has never been negatively impacted due to trauma, please select the "Not applicable" option)
 - a. Primary care services (e.g. general practitioners, etc.)
 - b. Hospital-based services
 - c. Dental care services
 - d. Emergency care services (e.g. emergency rooms)
 - e. Preventive services (e.g. screenings, vaccinations, etc.)
 - f. Rehabilitative services (e.g. physical therapy, occupational therapy, etc.)
 - g. Mental health services (e.g. psychiatry, counselling and therapy)
 - h. Home health care services (e.g. in-home nursing, etc.)
 - i. Telehealth services (e.g. virtual consultations, etc.)
 - j. Other
 - k. Don't know / not sure
 - l. Not applicable - My experience of health or care services has never been negatively impacted due to trauma
 - m. Prefer not to say

3. How often, if at all, do you avoid/have you avoided using any health or care services because of your trauma?
 - a. Very often
 - b. Fairly often
 - c. Sometimes
 - d. Rarely
 - e. Never
 - f. Don't know
 - g. Prefer not to say

4. Thinking about when you were using a health or care service. Which, if any, of the following medical professionals have you ever told about your trauma? (Please select all that apply. If you have never told a medical professional about your trauma, please select the "Not applicable" option).
 - a. Mental health professionals
 - b. Pharmacists
 - c. Nurses
 - d. Surgeons
 - e. General practitioners (GPs)
 - f. Dermatologists
 - g. Physiotherapists
 - h. Other
 - i. Don't know/ can't recall
 - j. Not applicable - I have never told a medical professional about my trauma
 - k. Prefer not to say

5. You previously mentioned that you have told a medical professional about your trauma...How comfortable or uncomfortable did you feel telling them about your trauma?
 - a. Very comfortable
 - b. Fairly comfortable
 - c. Neither comfortable or uncomfortable
 - d. Fairly uncomfortable
 - e. Very uncomfortable
 - f. Don't know/ can't recall
 - g. Prefer not to say

6. What barriers, if any, have you faced in telling medical professionals about your trauma? (Please select all that apply. If you have never faced barriers in telling your medical professionals about your trauma please click on "Not applicable" option)
 - a. I do not think it is relevant to my treatment
 - b. I am not confident explaining my trauma
 - c. I do not feel comfortable talking to medical professionals about sensitive/personal issues in general
 - d. I do not think medical professionals will handle my trauma sensitively
 - e. I have previously had a negative experience when I have disclosed my trauma
 - f. Other

- g. Don't know
 - h. Not applicable - I have never faced barriers in telling my medical professional about my trauma
 - i. Prefer not to say
7. Please imagine that trauma cards were available free of charge, and that you had experienced trauma...How likely, or unlikely, would you use a trauma card?
- a. Very likely
 - b. Fairly likely
 - c. Fairly unlikely
 - d. Very unlikely
 - e. Don't know
 - f. Prefer not to say
8. Have you been diagnosed with any of the following medical conditions?
(Please select all that apply)
- a. Autism (ASD)
 - b. Dyspraxia
 - c. Dyscalculia
 - d. Dyslexia
 - e. Dysgraphia
 - f. ADHD/ADD (attention deficit hyperactivity disorder/ attention deficit disorder)
 - g. Tourette's
 - h. None of these
 - i. Prefer not to say

Appendix 2: calculating population figures

At several points in this report we have referenced both percentages and how many people those percentages represent. The percentages are all taken from the survey conducted by YouGov. We used these percentages to calculate the number of people they represent.

We have been able to do this because the survey is a representative sample of adults in England. This means we can be confident that the percentages in our sample mirror the percentage in the whole adult population. Therefore, if we know the figure for the adult population of England, we can extrapolate the percentages in our sample to the number of people within the whole adult population.

The ONS publishes population estimates broken down by age.¹⁴ Using this, we can exclude people under 18 and see that the adult population of England is 45,691,677. We have used this figure to calculate the figures in our report.

For example, our survey found that 59% had experienced trauma at some point. This being a representative sample, we can be confident that means that 59% of the adult population overall have experienced trauma. 59% of 45,691,677 is 26,958,089. This means we can estimate that around 27 million adults in England have experienced trauma.¹⁵

In some of our questions, respondents are only those who gave a specific answer to another question. For example, several of our questions are only to those who have experienced trauma. In these cases, we have simply done two versions of the above calculation. For example, we found that 39% of those who have experienced trauma felt it have negatively impacted their experience of health and care services. We calculated that this equates to about 11 million people by taking our previously calculated figure for how many people have experienced trauma and calculating 39% of that.

This is the methodology we have taken throughout the report. We have rounded the figures to the nearest million and caveated them as 'around' that number, to avoid claiming too much specificity from our extrapolations.

¹⁴ The dataset to make this calculation can be downloaded from: [Estimates of the Population of England and Wales](#), Office for National Statistics, 2024

Appendix 3: Trauma cards costs (Healthwatch Essex)

Healthwatch Essex have identified further costs that would be necessary for the successful further development of their card for a pilot including web development, training resources, card design updates and project evaluation of between £50,000 and £62,000.

When rolling out the initiative locally, Healthwatch Essex produced cards and information sheets in batches of 250. The production and postage costs came to £2.66 per card, though this would likely be lower when produced in much higher numbers.

However, using these figures as a starting point, NHS England could fund the production and postage of the following number of cards through a small budget:

Budget	Number of trauma cards provided
£50,000	At least 18,797
£100,000	At least 37,594
£250,000	At least 93,984
£500,000	At least 187,969
£1,000,000	At least 375,939



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