

Appendix 3: Summary of Focus Group Sessions (including demographic breakdown of participants)

Age

Age	% of participants
0-18	3%
19-30	33%
31-40	19%
41-50	17%
51-60	11%
61-70	6%
71-80	8%
81+	2%

Ethnicity

Ethnicity	% of participants
English/Welsh/Scottish/Northern Irish/British	52%
Any other White background	0%
Mixed/multiple ethnic groups	10%
Asian/ Asian British	24%
Black/ African/ Caribbean/ Black British	10%
Any other ethnic group	3%
Prefer not to say	2%

Gender

Gender	% of participants
Male	56%
Female	41%
Non-binary	0%
Prefer not to say	3%

Faith

Faith	% of participants
Christian (including Church of England, Catholic, Protestant, and all other Christian denominators)	32%
Buddhism	2%
Hindu	0%
Muslim	22%
Jewish	0%
Sikhism	5%
No Religion	29%
Any other religion (please specify)	5%
Prefer not to say	6%

Sexual Orientation

Sexual Orientation	% of participants
Bisexual	5%
Gay	10%
Lesbian	3%
Heterosexual or Straight	57%
Other	5%
Prefer not to say	17%

Health Condition/s (if applicable)*

Health Condition	% of participants
Vision (e.g. blindness or partial sight)	8%
Hearing (e.g. deafness or partial hearing)	11%
Mobility (e.g. walking short distances or climbing stairs)	16%
Dexterity (e.g. lifting and carrying and carrying objects, using a keyboard)	5%
Learning or understanding or concentrating	11%
Memory	10%
Mental Health	46%
Stamina or breathing or fatigue	13%
Socially or behaviourally (e.g. associated with autism, attention deficit disorder or Asperger's syndrome)	3%
Other (please specify)	5%

**Note: percentages do not add up to 100% as participants allowed more than one option*

Thematic Topics

The everyday use of digital technology to improve participants' health

- Anxiety and frustration with using digital technology/ go online to book a GP appointment; *"I feel dependent as I can't do it myself" "It is embarrassing having to ask my children"*
- Digital technology as a means for improving mental wellbeing. One participant said *"I listen to music on Apple Music every single day and music for me is therapeutic, so that improves my mental health"*
- Those who were more committed to activity goals were more likely to use digital technology to boost their ability to track metrics like step count and weight; *"it tells you how many steps you've done and I've come to rely on that... I'm borderline diabetic and I've been told to lose weight"*
- Quality and intuitiveness to websites and applications can encourage or dissuade people from using them; *"there was a stark basic engagement with the NHS in comparison to using my private healthcare provider to book and conduct an online appointment leading to swift treatment"*
- In terms of activity, younger participants thought that digital technology helped because *"it is easier than going to the gym and paying someone"*
- The expectation that everyone uses digital technology and/or are digitally engaged can cause issues; *"they assume everybody has something in their house (that can connect to the internet) and that isn't the case"*

Participants' attitudes towards digital technology and their own health

- Some participants spoke about how digital technology is a good motivator but can also be obsessive and intrusive; *"My daughter is obsessed with getting her target steps in and will often just walk around the house to ensure she gets to 10,000 steps"*
- Positive attitude towards digital technology removing barriers and increasing access to information; *"it pushes me to be more active and find likeminded people"*
- Concerns around over-reliance on digital technology leading to limited face-to-face interaction.
- Some participants noted the easiness that digital technology has introduced when dealing with their health but reflected that it can only travel in one direction and make a person more reliant on technology than before; *"it make us lazy" "it's hard to reverse... it's only going to get worse"*
- Other participants said they were sceptical of health information being promoted online because it was difficult to differentiate between experts and non-experts; *"everybody seems to be an expert, but they're not trained... they could just be someone messing about", "Who monitors the information that's online and who puts information on there initially?"*
- Participants were worried about being overwhelmed by information on social media platforms and how that can have a negative effect; *"there is too much out there. Social media, it's too accessible for younger people to access... I have concerns about victimisation, body shaming, child exploitation etc"*
- The balance between health-supporting apps for physical health and the effect on mental health was discussed by some participants; *"I think if I just pick this and this with my time, I could be my healthiest self, but you end up looking at the polar opposite and it just pulls you down"*

- Some participants highlighted the concern that digital technology and/or broadband connection created contract or subscription costs that are difficult to balance with other necessities; *“well that’s one of the things when you’re unemployed, if you’ve got to pay a contract, it’s going to be very difficult to eat or heat and pay that”*

Participants’ attitudes towards digital technology and the wider health of the public

- Awareness of health-improving digital technology (e.g. wearables, health apps) but lack of full information and/or desire to use them; *“A fitness tracker or something that picks up when I am eating carbs would be good for me, but I can’t afford it at the moment”*
- The potential to influence a wide audience through digital technology; *“it is a quick and easy way to get a lot of people fitter”*. One participant used the example of Captain Tom who created an example of activity during the 2020 lockdown *“by walking around his garden and inspiring the country to get up and do something positive”*
- Concerns about system integration and different services not communicating with each other; *“How can one GP get to know what is wrong with that patient, but I have to explain myself to the next GP?”*
- The potential that digital messaging can have on public health campaigns was identified by several participants, although it needed to be more consistent; *“I see a lot of stuff around healthy eating in schools but the follow up doesn’t happen and can’t be followed up”*
- The ability of digital technology to socially connect people was picked up as an opportunity for public health; *“I think we have experienced that a lot within Covid, using games and apps. I think it has the social connectiveness with it as well – even though you aren’t fully social you are still social”*
- Digital exclusion was identified as a downside of having the majority of information online; *“by having so much online and so much available through technology, you isolate potentially some of the groups who need it the most”*
- The use of health-related apps such the NHS Covid-19 app during the pandemic was recognised as a positive example of digital technology; *“when it’s used to the good, you’ve only got to see the pandemic we’ve been through and at times they needed to act fast and contact certain groups”*

The issues with using digital technology for improving health

- Several participants mentioned having issues with storage and charging with digital devices which had knock on effects on how comfortable they felt using them; *“I have a step counter on my phone, and I worry about the space it uses up” “I worry about charging all these devices, now with energy prices as my children charge theirs up too”*
- Addiction to digital technology, even with the intention to improve health, can have a detrimental impact on mental health; *“you keep pushing yourself and pushing yourself every day, then that’s probably not going to end up being very good for you”, “it just becomes addictive and becomes about the numbers... that’s why I don’t use it at all”*
- Concern from parents about what their children are accessing and how it can influence negative health behaviours; *“Protect younger generations because you can see eating disorders spreading... you see all these models and it makes them feel like they’re not good enough”*
- Similarly, some participants said it was become more difficult to judge if health and wellbeing information was incorrect or misleading.

- Data control and privacy around apps that can track you was highlighted as a recurring issue; *“you could see where people’s houses were, you could see if people were at home... that was the final straw for Snapchat for me. I don’t want to be tracked”*
- Some participants did not have much confidence in online advice or consultations and were worried that increasing use of digital technology would leave them behind; *“Technology’s moving so fast that even people who’ve grown up in the age of changing technology are now just struggling to keep up”*