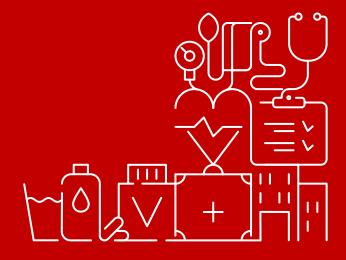
## nabhealth



NAB Behavioural & Industry Economics

# NAB AUSTRALIAN Consumer Health Survey 2021

How Australians view their health, their attitudes to telehealth and a preventative health mindset



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## COVID-19 HAS ACCELERATED AND Amplified interest in preventative Health & Digitisation.

Key Messages: The NAB 2021 Consumer Health Survey provides unique insights into Australia's health system through the eyes of those who rely upon it - patients. Over 2,000 Australians shared their views on their personal health, attitudes towards telehealth and telemedicine and whether their behaviours had shifted since COVID-19 toward a preventative health mindset. The findings suggest that health perceptions and behaviours have changed in Australia. Perceptions of health are improving but remain well below pre-COVID-19 levels. Of concern, self-reported health (particularly physical and social) remains much worse for those on lower incomes. That said, for many Australians COVID-19 has accelerated and amplified interest in prioritising their own health, particularly among younger people and higher income earners. Interestingly, noticeably more men report placing a greater priority on their health since COVID-19 than women, while those in the ACT have the most preventative health mindset, also coming out on top for self-reported levels of mental and emotional health.

Despite the challenges of COVID-19, almost 7 in 10 Australians have managed to stay connected with family or friends and 6 in 10 to eat healthy. Around 1 in 4 Australians are very interested in preventative health screening tests, even if not covered by Medicare or health insurance, with men expressing higher levels of interest than women, along with higher income earners. Of concern however almost 1 in 3 Australians report currently never or rarely having regular general health tests and over 1 in 3 dental health checks. Interestingly, people on higher incomes are currently less likely to have regular general health check-ups or screenings than those on lower incomes.

Many of us have turned to telemedicine to support our health and remain engaged with health professionals during COVID-19. This trend looks set to continue, with almost 1 in 3 Australians reporting their overall experience better during a telehealth consultation with a GP or specialist doctor compared to face-toface. That said, face-to-face remains the clear preference for general check-ups, acute ailments, mental health, or an appointment for an elderly person or child.



Interestingly, noticeably more men report placing a greater priority on their health since COVID-19 than women"



The term "healthy" is difficult to define, involving a combination of emotional, mental, physical, and social aspects of our health. When NAB again asked Australians to assess the state of their own health across these various domains, the findings were more positive compared to last year, particularly regarding social health as COVID-19 restrictions eased, but also physical and mental health. That said, perceptions remain well below pre-COVID-19 levels.

Health perceptions continue to vary widely by gender, age and geography. Men continue to view their emotional/mental and physical health much more favourably than women, while older people see themselves as healthier across all aspects, particularly emotional and mental health compared to younger Australians. Where you live can also impact your perception of your health.

Importantly, around 4 in 10 Australians believe they are prioritising their own health more since COVID-19. Fewer than 1 in 10 are placing a lower priority on their health, while for around 1 in 2, priorities are about the same. Interestingly, noticeably more men (43%) report placing a greater priority on their health since COVID-19 than women (35%). By age, around 1 in 2 Australians aged 18-29 (49%) and 30-49 (46%) have placed more emphasis on their health since COVID-19.

When asked whether they believe they have a "preventative health mindset", on average Australians scored their behaviours as "moderately" preventative at 63.2 pts out of a possible 100. Men (64.8 pts) scored themselves noticeably higher than women (61.8 pts). There was also a clear relationship with age, ranging from 57.1 among the 18-29 age group stepping up progressively to 71.1 pts for the over 65s. This disparity highlights the importance in the shift in health priorities among younger people since COVID-19. By state, outcomes were strongest in the ACT (66.1 pts) and somewhat higher than in SA (64.8 pts) and QLD (64.5 pts), the next best states, and lowest in TAS (58.2 pts), which was significantly below all other states. There was also a gap between Australians living in capital cities (64.0 pts) compared to those in rural areas (60.1 pts).

Where have Australians concentrated their preventative health efforts over the past 12 months? Despite the challenges of COVID-19, almost 7 in 10 stayed connected with family or friends (34% always; 35% often). Around 6 in 10 ate healthy or made good food choices (19% always; 42% often) and protected their skin from the sun (24% always; 37% often). More than half of all people (55%) spend time outdoors or in nature (18% always; 37% often). Around 7 in 10 also said they never (61%) or rarely smoke (5%) and almost 4 in 10 never (16%) or rarely (21%) drink alcohol. The main areas where Australians preventative mindset fell short included monitoring health using apps, phones or other devices (39% never; 16% rarely), participating in fitness programs (35% never; 14% rarely), having regular dental check-ups (12% never; 25% rarely) and having regular general health tests (14% never; 20% rarely).



Where have Australians concentrated their preventative health efforts over the past 12 months?

- 7 in 10 stayed connected with family or friends
- 6 in 10 ate healthy and protected their skin from the sun
- More than half of all people (55%) spend time outdoors or in nature
- 7 in 10 also said they never or rarely smoke
- 4 in 10 never or rarely drink alcohol

Importantly, around 4 in 10 Australians believe they are prioritising their own health **more since COVID-19.** 

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REAL PROPERTY.

The report also explores the issue of preventative screening for some conditions and diseases. NAB asked Australians how interested they would be in obtaining a preventative health diagnostic test (e.g. genetic testing, MRI scan, etc.) not covered by Medicare or health insurance, but offering a more personalised and comprehensive health assessment. On average, Australians can at best be described as only "mildly" interested, scoring just 45.5 pts out of 100 (where 100 is extremely interested). These findings are perhaps not surprising, with around 1 in 3 Australians reporting that they never or rarely have regular general health tests (14% never; 20% rarely). That said, around 1 in 4 Australians (23%) said their interest in obtaining a health diagnostic was "high" (i.e. rated their interest 80 points and above), suggesting there is a market for this service. Interestingly, men (48.9 pts) expressed much higher levels of interest than women (42.3 pts). By age, interest is highest in the 30-49 group (52.2 pts) and lowest in the over 65 group (37.0 pts).

While interest in preventative screening remains modest, many Australians have turned to telemedicine to support their health and remain engaged with their health professional during COVID-19. In fact, around 1 in 2 Australians have had a telehealth consultation with a GP or local doctor and 1 in 5 with a specialist since COVID-19 began. Noticeably more women (54%) have had a telehealth consultation with a GP compared to men (43%), while the number is broadly similar for specialist doctors. By age, GP engagement using telehealth was much more common among people under the age of 50, but broadly similar across all age groups for specialist doctors. Not surprisingly, in VIC (hardest hit by COVID-19-related

lockdowns), around 2 in 3 people have experienced a GP telehealth consultation, compared to only 1 in 3 in the ACT. For specialists, it was highest in TAS and VIC and again lowest in the ACT. Over 8 in 10 GP telehealth appointments have been conducted by telephone and over 6 in 10 with a specialist doctor. Only around 1 in 20 Australians used videoconferencing when consulting a GP, compared to 1 in 5 for specialist doctor consultations.

Almost 1 in 3 Australians (31%) said their overall experience was better during a telehealth consultation with a GP or specialist doctor compared to face-to-face, while over 4 in 10 (44% for GPs, 47% for specialists) believed it was about the same. More specifically, around 4 in 10 believed their GP telehealth consultation offered a better experience regarding personal comfort, convenience and ease of getting an appointment, with 3 in 10 believing it was also better for value. Further, most (around 7 in 10) viewed courtesy, respect, sensitivity, friendliness, sense of privacy and their levels of truthfulness the same as a face-to-face appointment. But around 1 in 4 Australians also signalled that the length of time with the health professional was worse, with 1 in 5 also highlighting their ability to be understood, the explanation of their condition or treatment as inferior to face-to-face.

Men were typically more positive about their experience across all factors, as were people in the 30-49 age group. When visiting a specialist doctor, over 4 in 10 Australians indicated telehealth offered a better experience in regard to personal comfort and level of convenience, and around 3 in 10 for value or cost of consultation, ease of getting an appointment, truthfulness answering



Many Australians have turned to telemedicine to support their health and remain engaged with their health professional during COVID-19.

- 1 in 2 Australians have had a telehealth consultation with a GP
- 1 in 5 with a specialist
- Almost 1 in 3 Australians said their overall experience was better during a telehealth consultation
- 4 in 10 believed their GP telehealth consultation offered a better experience regarding personal comfort

medical questions and length of time with them. But around 1 in 4 people felt the length of time offered on a telehealth appointment with a specialist was inferior to face-to-face and 1 in 5 in terms of their ability to understand the health professional.

When those who felt telehealth offered a poorer experience were asked to elaborate, some of the more common responses included: greater difficulty in speaking candidly, the inability of health professionals to make a thorough diagnosis, frustration over the need for a follow-up face-to-face consultation, challenges understanding health professionals, missing visual cues or body language, a more impersonal experience, a lack of privacy and having to edit conversations due to the proximity of other family members or house mates, being inadequate for new conditions or illnesses, difficulty in explaining symptoms, missing the reassurance of seeing a doctor in person, time taken to book an appointment or lack of suitable appointment times, being placed on hold, technology issues cutting into consultation time, feeling rushed and flustered, the inability of the health professional to see any physical changes in a patient, and having to self-help.

There were 5 areas where Australians had a clear preference for face-toface consultations with their health professional: a general check-up appointment; acute ailment appointment; mental health related appointment; or an appointment for an elderly person or child. There was, however a much stronger preference for telehealth over face-to-face for renewing a prescription, with preferences more evenly split between telehealth and face-to-face for referral appointments, results follow-up appointments and minor or common ailment appointments.

Interestingly, men were more likely to prefer face-to-face consultations than women, particularly regarding a minor/ common ailment appointment, renewing a prescription and a results follow-up appointment. Older Australians were also more likely to favour face-to-face, particularly for a results follow-up appointment, a minor/common ailment appointment or renewing a prescription.



# KEY Survey Findings



## PART 1: Self-Reported Health Perceptions

### Are we "healthy"?

Overall, Australians believe they are "reasonably" healthy across all 3 NAB health measures – social, physical and emotional and mental health. Self-reported outcomes were strongest for social health (66.4 pts) followed by emotional and mental health (65.0 pts). Physical health was rated lowest (62.6 pts).

## Are there differences between men and women?

Men rated their emotional and mental health and their physical health much higher than women. Perceptions of social health were, however broadly similar. Men were most positive about their emotional and mental health, and least positive about their physical health. Women, however were most positive about their social health and least positive about their emotional and mental health – and by considerable margin.

### What about age?

Australians over the age of 65 rated all aspects of their health higher than other age groups, particularly their emotional and mental health. Younger people (18-29) fell well behind for self-reported emotional and mental health, with the 50-64 age group by far the least positive about their physical and social health.

### Does where we live matter?

It seems so, with significant differences in perceptions across the country. Tasmanians reported much lower health outcomes for all measures, particularly physical health. The ACT led the way for emotional and mental health, NSW for physical health and SA for social health. Australians in all states and territories reported the highest outcomes for social health, except QLD and the ACT where emotional and mental health was highest. Physical health rated lowest in all states and territories.





The ACT led the way for emotional and mental health, NSW for physical health and SA for social health."

## PART 2: Attitudes to telehealth/ Telemedicine

How many Australians have had a telehealth consultation with a GP or specialist doctor since COVID-19? Around 1 in 2 people have had a telehealth consultation with a GP or local doctor and

around 1 in 5 with a specialist doctor.

### Did this vary by gender and age?

Noticeably more women (54%) have had a telehealth consultation with a GP since COVID-19 than men (43%), but the number was broadly similar for specialist doctors (around 1 in 5). By age, usage of telehealth with a GP was much more common among people under the age of 50 than in older groups, but broadly similar in all age groups for specialist doctors.

## Were state and regional patterns different?

Yes. In VIC (hardest hit by COVID-19-related lockdowns), around 2 in 3 had a telehealth consultation with a GP, compared to only 1 in 3 in the ACT. Telehealth consultations with specialist doctor were highest in TAS and VIC and again lowest in the ACT. Regional cities led the way for virtual consultations with GPs but were slightly behind rural areas and capital cities for using a telehealth service with a specialist doctor.

## How were telehealth appointments done?

The vast majority were conducted by telephone – over 8 in 10 with a GP and over 6 in 10 with a specialist doctor. Using telephone and teleconference was next most widely used for GPs, but videoconference was the second most common media used for specialist doctor consultations.

# How did we rate our most recent virtual consultation with a GP compared with face-to-face?

Most Australians – around 7 in 10 – said the experience was the same for their level of truthfulness when answering medical questions, courtesy, respect, sensitivity and friendliness, and their sense of privacy. Around 4 in 10 said it was better in regard to personal comfort and level of convenience, and ease of getting an appointment, and 3 in 10 the overall experience and value or cost of the consultation. But around 1 in 4 Australians also signalled the length of time with the health professional and overall experience was worse, with 1 in 5 also highlighting the ability to understand them (e.g. voice and visual quality) and explanation of their condition or the treatment offered as the reason why it was worse. Men were typically more positive about their experience across all factors, as were people in the 30-49 age group.

#### What about with a specialist doctor?

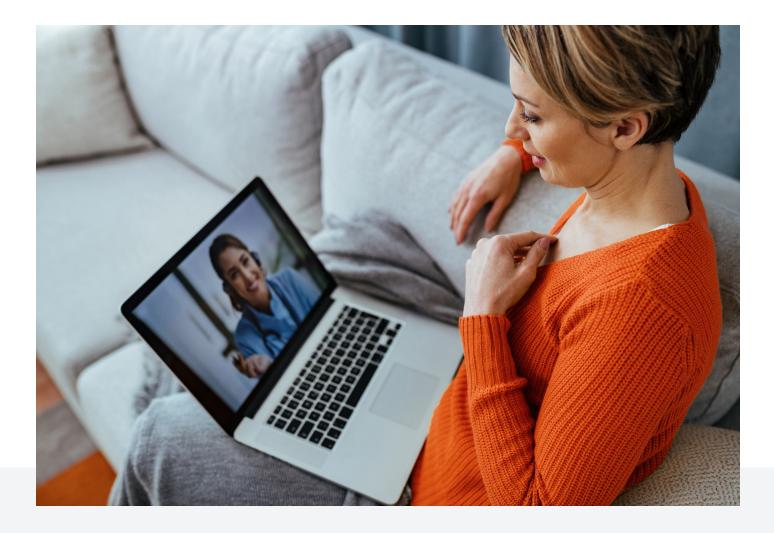
Like their virtual consultations with a GP, Australians rated their experience similarly for a specialist doctor. Most – around 6 in 10 - said it was the same for the level of courtesy, respect, sensitivity and friendliness, level of truthfulness when answering medical questions, sense of privacy and explanation of their condition or treatment. Over 4 in 10 indicated it was better for personal comfort and level of convenience, and around 3 in 10 highlighted the overall experience, value or cost of consultation, ease of getting an appointment, level of truthfulness when answering medical questions and length of time with them better. But 1 in 4 said the length of time was worse and 1 in 5 said the overall experience and ability to understand the health professional was worse.

### What were the key reasons why a telehealth consultation was worse than a face-to-face visit?

The main reasons why it was worse with a GP were "not being able to have a physical examination or tests", "a preference for face-to-face", "time spent on the appointment and feeling rushed", "communication was not as good, clear or in-depth", "felt impersonal or had no connection" and "they were missing visual cues, body language or things were hard to 'show'". These were also key reasons why the experience with a specialist doctor was worse.

### To what extent do Australians prefer telehealth appointments over face-to-face?

There were 5 areas where they had a clear preference for face-to-face: a general check-up appointment; acute ailment appointment; mental health related appointment; or an appointment for an elderly person or child. There was however a much stronger preference for telehealth than face-to-face for renewing a prescription, with preferences more evenly split between telehealth and face-to-face for referral appointments, results follow-up appointments and minor or common ailment appointments.



## PART 3: PRIORITISING HEALTH & PREVENTATIVE HEALTH MINDSET

## Are Australians prioritising their health since COVID-19?

Overall, around 4 in 10 are prioritising it more since COVID-19. For around 1 in 2 it was about the same. Encouragingly, only 7% of Australians have put a lower priority on their health.

### Does gender or age make a difference?

Noticeably more men have prioritised their health since COVID-19 than women, as did people under the age of 50 (about 1 in 2). Around 3 in 4 people over the age of 65 said their priorities had not changed (likely reflecting a more positive preventative health mindset). But it is of some concern that 1 in 10 people over the age of 65 have also put less priority on their health since COVID-19.

## Do we have a "preventative health mindset"?

On average, our health mindset is "moderately" preventative, scoring 63.2 pts out of 100. Men rated their mindset somewhat higher than women, with self-reported outcomes strongest in the ACT and lowest in TAS – and significantly more so than in all other states. We also noted a very clear relationship between preventative health mindset and age. It was lowest in the 18-29 age group, at just 57.1 pts, and stepped up progressively to 71.1 pts in the over 65 group.

# Where have we concentrated our efforts to have a preventative mindset over the past 12 months?

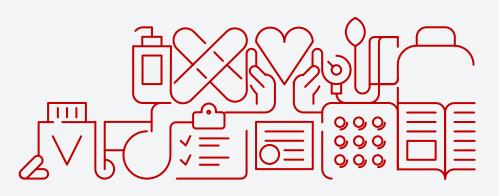
For around 7 in 10, it was always or often staying connected with family or friends, and for 6 in 10 eating healthy or making good food choices or protecting their skin from the sun. Around 7 in 10 also said they never or rarely smoke and almost 4 in 10 never or rarely drink alcohol. The main areas where preventative mindset fell short for many Australians included monitoring their health using apps, phones or other devices, participating in fitness programs, and having regular dental check-ups or regular general health tests.

### Are we interested in having preventative health diagnostic tests not covered by Medicare or health insurance?

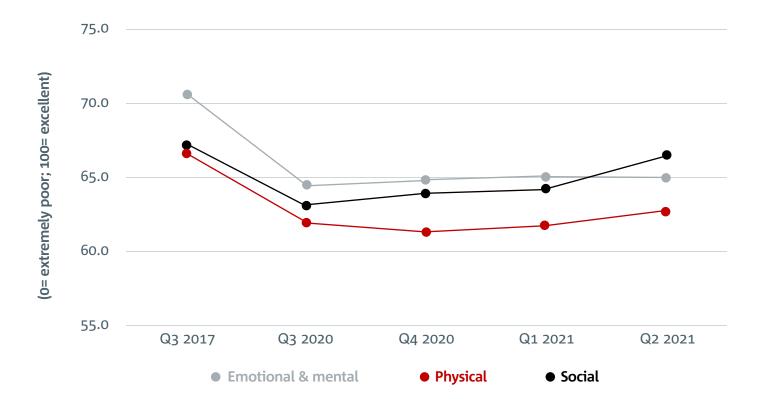
Only mildly. On average, Australians scored their interest at just 45.5 pts out of 100 – with only 23% rating it "high" (80 points or above). Moreover, the level of interest is relatively low across the country, but highest in the ACT (49.9 pts) and lowest in SA (42.5 pts) Capital city dwellers (47.7 pts) were noticeably more interested than people living in rural areas (38.2 pts). Men (48.9 pts) also expressed much higher levels of interest than women (42.3 pts). By age, interest was highest in the 30-49 group (52.2 pts) and lowest in the over 65 group (37.0 pts), where it was also lowest of all key groups.



# PART 1: Self-reported Health Perceptions



## OUR HEALTH TODAY: Overall



The term "healthy" is difficult to define, involving a combination of an individual's emotional, mental, physical and social aspects of health. NAB has been tracking self-reported levels of health across 3 measures – emotional and mental health, physical health and social health – as part of its Wellbeing research. Health perceptions are more positive compared to last year, particularly regarding social health as COVID-19 restrictions eased, but also physical and mental health. That said, perceptions remain well below pre-COVID-19 levels.

Australians on average believe they are "reasonably" healthy across all 3 health measures. Self-reported outcomes were strongest for social health (i.e. the quality of interactions and meaningful relationships with others), which has also been climbing in recent quarters to 66.4 pts in Q2 2021. Australians were also slightly more positive about their physical health (i.e. soundness of the body, freedom from disease or abnormality) than in recent quarters (62.6 pts), while perceptions of their emotional and mental health (i.e. ability to cope with the normal stresses of life and take pleasure and satisfaction from life) remained steady at (65.0 pts).

# OUR HEALTH RATED BY GENDER, AGE, STATE & INCOME: Q2 2021

	Overall	Men	Women	18-29	30-49	50-64	65+	NSW	VIC	QLD	SA	ACT	WA	TAS	<\$35,000 p.a.	\$35-50,000 p.a.	\$50-75,000 p.a.	\$75-100,000 p.a	\$100,000+ p.a.
Emotional/ mental	65.0	67.5	62.8	58.5	62.3	63.8	77.2	65.4	64.8	64.5	65.5	68.5	64.2	58.5	63.0	65.4	64.3	65.8	65.8
Physical	62.6	65.1	60.3	62.0	63.2	59.9	65.3	64.2	63.5	60.2	62.3	59.5	62.2	51.6	56.5	60.8	61.1	64.5	66.5
Social	66.4	66.5	66.4	64.1	64.1	63.8	74.9	66.9	66.4	64.1	68.6	66.6	67.4	59.4	62.3	63.9	65.3	66.8	68.9

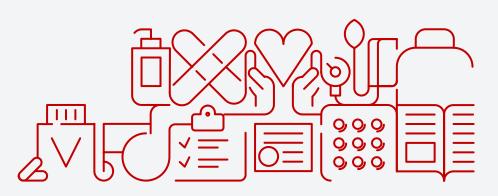
Assessments of our own health vary by gender, age and where we live. The gender split found men rate their emotional and mental health (67.5 pts) much higher than women (62.8 pts). They are also much more positive about physical health (65.1 pts men; 60.3 pts women). Perceptions of social health are however broadly similar (66.5 pts men; 66.4 pts women).

The survey also found that men were most positive about their emotional and mental health, and least positive about their physical health. Women however were most positive about their social health and least positive about their emotional and mental health – and by a considerable margin.

By age, Australians over the age of 65 rated all aspects of their health higher than other groups, particularly social health (74.9 pts) and their emotional and mental health (77.2 pts) – a result that remains consistent with NAB's Wellbeing research, which shows that as we age we also tend to view many aspects of our non-physical wellbeing more favourably than younger people. Younger Australians in the 18-29 group fell well behind for self-reported emotional and mental health (58.5 pts), with the 50-64 age group by far the least positive about their physical health (59.9 pts), and also rated their social health lowest (63.8 pts).

By income, there is a significant difference between perceptions of physical health, with those on less than \$35,000 (56.5) much less positive than those on higher incomes (66.5 for those earning over \$100,000). There are also large gaps on social health between lower and higher income earners. We also noted significant differences in perceptions across states and territories (we have excluded the NT because of smaller sample size issues). Australians living in TAS reported significantly lower health outcomes for all measures. particularly physical health, where they scored 11.0 pts lower than the national average. The ACT led the way for emotional and mental health (68.5 pts), NSW for physical health (64.2 pts) and SA for social health (68.6 pts). Australians in all states and territories reported the highest health outcomes for social health, except QLD and the ACT where emotional and mental health was highest. Physical health was rated lowest in all states and territories.

# PART 2: ATTITUDES TO TELEHEALTH/ TELEMEDICINE

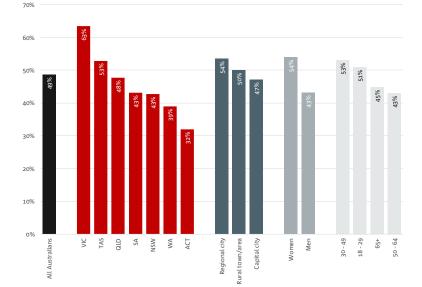


# AUSTRALIA'S ATTITUDES TO TELEHEALTH/TELEMEDICINE

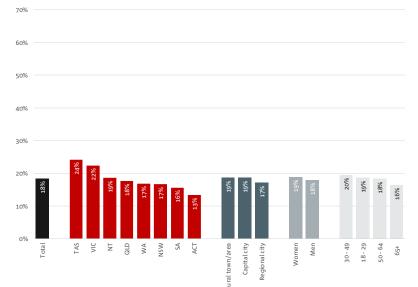
Since the outbreak of COVID-19, the growth of telehealth services has been explosive. Department of Health data shows that over the year to April 2021, over 56 million COVID-19 Medicare Benefit Schedule (MBS) services were delivered to 13.6 million patients, with almost 84,000 providers having used telehealth services. In this survey, we look at the number of Australians that have used telehealth services (both with GPs or local doctors and specialist doctors), how they rated their experience, their likes and dislikes and how it compared to a traditional faceto face visit.

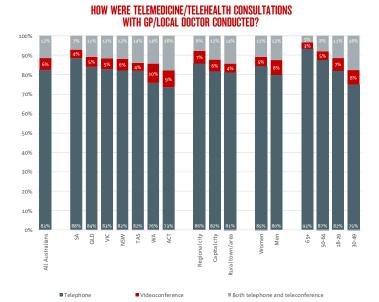
NAB's survey shows that around 1 in 2 (49%) Australians have had a telehealth or telemedicine consultation with a GP or local doctor since COVID-19. But this number varied significantly across the country. In VIC (which was hardest hit by COVID-19-related lockdowns), around 2 in 3 (63%) said they had. This was significantly higher than in second place TAS (53%). Australians living in the ACT were least likely to have had a telehealth consultation with a GP or local doctor (32%) since COVID-19. Telehealth consultations with GPs or local doctors was most widespread in regional cities (54%), followed by rural areas (50%) and capital cities (47%). Noticeably more women (54%) had a telehealth consultation

#### NUMBER OF AUSTRALIANS THAT HAVE HAD A TELEMEDICINE/TELEHEALTH Consultation with a gp/local doctor

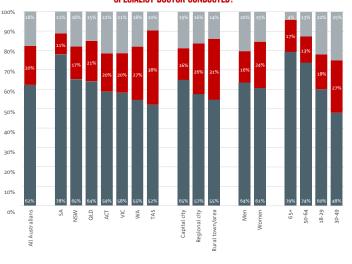


NUMBER OF AUSTRALIANS THAT HAVE HAD A TELEMEDICINE/TELEHEALTH Consultation with specialist doctor





HOW WERE TELEMEDICINE/TELEHEALTH CONSULTATIONS WITH SPECIALIST DOCTOR CONDUCTED?



Videoconference

with a GP since COVID-19 than men (43%). By age, we also noted key differences in the number of people that had a telehealth consultation with a GP or local doctor, with usage much more common among Australians under the age of 50 than in older age groups.

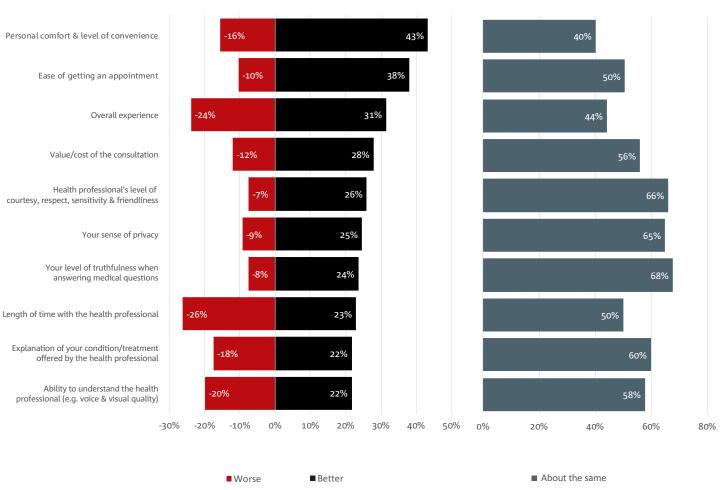
Far fewer Australians – around 1 in 5 or 18% – said they have had a telehealth consultation with a specialist doctor since COVID-19. Interestingly, the number of virtual consultations with specialist doctors was also highest in TAS (24%) and VIC (22%) and lowest in the ACT (13%). Regional cities led the way for virtual consultations with GPs, but were slightly behind rural areas (19%) and capital cities (17%) for using a telehealth service with a specialist doctor (17%). By gender, the number of women (19%) and men (18%) that had a telehealth consultation with a specialist doctor since COVID-19 was broadly similar - in contrast to telehealth consultations with GPs, which was much higher for women. By age, there was little difference in the number that had a telehealth consultation with a specialist doctor, ranging from 20% in the 30-49 age

group to 16% in the 65+ group. Australians who had a telehealth consultation with a GP or specialist doctor were also asked how they were conducted. The vast majority were over the telephone - over 8 in 10 (83%) with a GP or local doctor and over 6 in 10 (62%) with a specialist doctor. A telephone consultation was most commonly used in all key groups. By state however usage ranged from 88% in SA to 73% in the ACT for GPs, and from 78% in SA to 52% in TAS for specialist doctors. Telephone consultations with GPs were more common in regional cities (86%) than capital cities (82%) and regional areas (81%), but for specialist doctors it was highest in capital cities (65%), and noticeably more so than in regional cities (57%) and rural areas (55%). By gender, telephone consultations with a GP were more common among women (85%) than men (80%), but more common for men (64%) than women (61%) with a specialist doctor. By age, telephone consultations were used more extensively in the over 65 age group for both GPs (93%) and specialist doctors (79%) than in the 30-49 group (79% and 48% respectively).

Telephone

Using telephone and teleconference was the second most widely used method for consultations with GPs (12%), but videoconference was the second most common media used for specialist doctor consultations. The charts above show that videoconference was rarely used with a GP but guite extensively for specialists (20%), especially in TAS (38%), rural areas (31%), among women (24%) and in the 30-49 age group (27%). The use of telephone and teleconference for specialist doctor consultations was highest in the ACT (22%) and VIC (21%), in capital cities (19%), among men (20%) and in the 30-49 age group (25%). When it came to telehealth consultations with GPs, using both telephone and teleconference was almost 3 times as high in the ACT (18%) than in SA (7%), and also much higher in the 30-49 age group (18%) than in the over 65 group (3%). Use of videoconference with a GP was least common in all groups, and highest in WA (10%), the ACT (9%) and for those under 50 (7-8%).

Both telephone and teleconference



## RATING OF VIRTUAL CONSULTATION WITH GP: BETTER/WORSE

NAB's 2021 Consumer Health Survey asked Australians to rate their telehealth experience with GPs and specialist doctors across a broader range of factors. The charts above show most rated their virtual consultation with a GP about the same as face-to-face for nearly all factors. Most also said the experience was about the same for their level of truthfulness when answering medical questions (68%), courtesy, respect, sensitivity and friendliness (66%), privacy (65%) and explanation of their condition (60%). In contrast, only 40% rated their personal comfort and level of convenience the same. This was the only factor where the number of Australians who said it was better (43%) exceeded those who rated the experience about the same. Other factors where the most Australians said a virtual consultation with a GP was better included ease of getting an appointment (38%), the overall experience (31%) and value or cost of the consultation (28%). Around 1 in 4 Australians however also signalled that length of time with the health professional (26%) and overall experience (24%) was worse. Other areas that were looked upon negatively by a significant number of Australians included the ability to understand the health professionals because of things such as voice and visual quality (20%) and the explanation of their condition or treatment offered (18%).

**ABOUT THE SAME** 

# RATING OF VIRTUAL Consultation with GP or Local Doctor (Net Balance)

	Total	Men	Women	18-29	30-49	50-64	65+
Personal comfort & level of convenience	28%	27%	29%	29%	37%	20%	16%
Ease of getting an appointment	27%	31%	25%	31%	37%	17%	15%
Health professional's level of courtesy, respect, etc.	18%	26%	12%	18%	29%	8%	9%
Your level of truthfulness when answering medical questions	16%	22%	12%	16%	22%	9%	11%
Value/cost of the consultation	16%	18%	14%	17%	17%	16%	12%
Your sense of privacy	15%	20%	12%	14%	22%	10%	10%
Overall experience	8%	13%	3%	11%	18%	-1%	-8%
Explanation of condition/treatment offered by health prof.	4%	12%	-2%	-1%	12%	-2%	1%
Ability to understand health prof. (e.g. voice/visual quality)	2%	11%	-6%	-7%	9%	-2%	2%
Length of time with the health professional	-3%	3%	-8%	-6%	6%	-6%	-16%

Another way to look at this is by measuring the "net balance" of responses. This is calculated by subtracting negative responses from positive responses. A positive result means the number of people who said it was better exceeded those who said it was worse. A negative net balance means the number who said it was worse outweighed those who said it was better. People who thought it was same are not counted.

In net terms, most people said their virtual consultation with a GP or local doctor was better than face-to-face because of

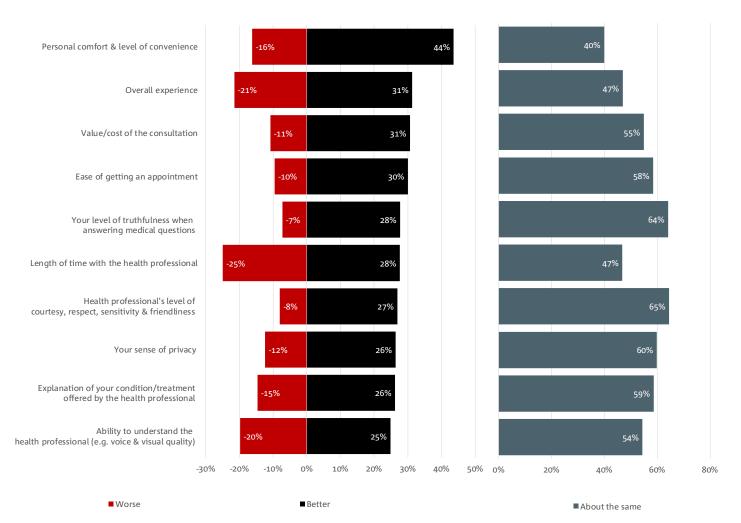
convenience (+28%) and ease of getting appointments (+27%). Length of time with the health professional was the only area where those who said it was worse outweighed those who rated it better (-3%).

More women said their experience with length of time (-8%), ability to understand health professional (-6%) and explanation about treatment or condition (-1%) was negative than positive. The number of men who said things were better however exceeded those who said it was worse for all factors. Men were also more positive than women for all factors. By age, the 30-49 group was most positive for all factors. It was however also clear that length of time with a health professional was a problem in the 65+ (-16%), 18-29 (-6%) and 50-64 (-6%) groups.

Most people said their virtual consultation with a GP or local doctor was **better than face-to-face** because of convenience (+28%) and ease of getting appointments (+27%).

### RATING OF VIRTUAL CONSULTATION WITH SPECIALIST: BETTER/WORSE

### **ABOUT THE SAME**



How did we rate our telehealth experience with specialist doctors compared to traditional face-to-face consultations with them?

The charts above show that, like their virtual consultations with a GP, Australians on the whole rated their experiences the same for specialists for nearly all factors. This was also most evident in their level of courtesy, respect, sensitivity and friendliness (65%), level of truthfulness when answering medical questions (64%), privacy (60%) and explanation of their condition or treatment (59%). Similar to their experiences with GPs, only 40% rated their personal comfort and level of convenience with a specialist doctor the same. This was also the only factor that the majority of Australians said was better (44%).

Other factors that most Australians said were better included the overall experience (31%), value or cost of the consultation (31%), ease of getting an appointment (30%), level of truthfulness when answering medical questions (28%) and length of time with them (28%). But 1 in 4 Australians also signalled that length of time (25%) was worse and 1 in 5 said the overall experience (21%) and ability to understand the health professional (20%) was worse. Other areas that were looked upon negatively by a significant number of Australians included personal comfort and convenience (16%) and explanation of their condition or treatment (15%).

# RATING OF VIRTUAL Consultation with specialist Doctor (Net Balance)

	Total	Men	Women	18-29	30-49	50-64	65+
Personal comfort & level of convenience	27%	30%	26%	43%	32%	7%	22%
Ease of getting an appointment	21%	20%	21%	30%	27%	-1%	20%
Your level of truthfulness when answering medical questions	20%	25%	16%	35%	26%	0%	14%
Value/cost of the consultation	20%	25%	15%	24%	24%	8%	19%
Health professional's level of courtesy, respect, etc.	19%	26%	12%	33%	22%	1%	16%
Your sense of privacy	14%	21%	8%	14%	21%	2%	13%
Explanation of condition/treatment offered by health prof.	12%	20%	5%	22%	19%	-10%	9%
Overall experience	10%	15%	5%	19%	15%	3%	-4%
Ability to understand health prof. (e.g. voice/visual quality)	5%	15%	-4%	11%	8%	-6%	6%
Length of time with the health professional	3%	17%	-10%	21%	12%	-21%	-10%

As with GPs, in net balance terms most people said their virtual consultation with a specialist was also better than face-toface because of personal comfort and convenience (+27%) and ease of getting an appointment (+21%). Length of time with the health professional rated lowest, although the overall number who said it improved still slightly outweighed those who said it was worse at +3% (compared to negative response of -3% for GPs).

More women said their experience with the length of time with the health professional

(-10%) and ability to understand them (-4%) was worse than better. In contrast, the number of men who said things were better outweighed those who said it was worse for all factors. Men were also more positive than women for all factors, and noticeably more so in all areas except ease of getting appointments, which was rated basically the same.

Key findings by age included significantly worse outcomes in the 50-64 group for length of time with health professional (-21%), explanation of treatment offered (-10%), ability to understand health professional (-6%) and ease of getting appointments (-1%) than any other age group. Length of time was also a significant issue in the 65+ group (-10%). The over 65s were also the only age group to report a net negative result from the overall experience. In contrast, the net number of people under 50 rated all factors better (and highest) for all factors.

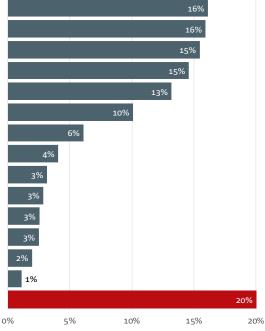
### People who rated any factor of their most recent virtual consultation with a GP or specialist doctor worse than a traditional face-to-face consultation were asked why. The charts to the left summarise

the results.

The most common factors why the experience with a GP was worse were not being able to have a physical examination or tests (16%), preference for face-to-face (16%), time spent on the appointment and feeling rushed (15%), communication was not as good, clear or in-depth (15%), it felt impersonal or had no connection (13%) and they were missing visual cues, body language or that things were hard to "show" (10%).

When it came to specialists, the main reasons were also time spent and feeling rushed (14%), preference for face-to-face (12%), missing visual cues, body language or things were hard to "show" (11%), not being able to have a physical examination or tests (10%) and communication was not as good, clear or in-depth (10%).

## WHY WE RATED SOME OF THE ASPECTS OF A TELEHEALTH/TELEMEDICINE CONSULTATION WITH GP WORSE THAN A TRADITIONAL FACE-TO-FACE VISIT



14%

22%

20%

Physical / full examination / tests not possible Prefer Face to Face Time spent / feeling rushed Communication not as good / clear / in depth Impersonal / less connection Missing visual cues /body language / hard to "show" Hearing or Language issues / hard to understand Fees / Cost Technical issues / barriers Waiting time for call Good / Better / Preferred Privacy / 1:1 Less empathy / concern / care shown Travel time / access / prefer staying at home

#### TELEHEALTH/TELEMEDICINE CONSULTATION WITH SPECIALIST Doctor worse than a traditional face-to-face visit

5%

10%

15%

Time spent / feeling rushed Prefer Face to Face Missing visual cues /body language / hard to "show" Physical / full examination / tests not possible Communication not as good / clear / in depth Impersonal / less connection Technical issues / barriers Hearing or Language issues / hard to understand Good / Better / Preferred Privacy / 1:1 Fees / Cost Waiting time for call Less empathy / concern / care shown Travel time / access / prefer staying at home 1% Other 0%

## WHY IS A TELEHEALTH Consultation worse than a **Traditional Face-to-face visit**?



Telephone appointments are fine if you want a wellness check, or to update your GP about how you are recovering or coping with an existing illness or condition, or to refill an existing script with your well-known GP. It's not great if you want to find out or need some help with a condition or illness that you've never dealt with before and find hard to explain the symptoms etc., or if you just need the faceto-face reassurance of seeing your GP." "As it was bulk billed, I felt it was a little more rushed than a traditional face-toface appointment where I have to pay a full consultation fee."

"It was extremely difficult to speak candidly to someone you've never met about intimate health issues, which they couldn't diagnose over the phone anyway. So, it was a waste of time and I still had to go in for a face-to-face consult."

"Because sometimes it's better to have a visual in-person demonstration of the problem or solution. Doctors can also be hard to understand as the occupation brings many different ethnicities and accents."

"I didn't feel relaxed or at ease speaking with the doctor over the phone instead of in person. It's too impersonal. I also didn't feel it was as private because even though I was in a separate room, I knew that others in the house could hear my end of the conversation through the walls. I said as little as possible to the doctor."

"It was impersonal and felt hard to gauge any visual response. I also felt the practitioner couldn't get a full idea of my situation." "To make a telehealth appointment during COVID-19 is very time-consuming. Most of the time, it's hard to find GP availability time and it's hard to get connected when needed. Receptionists take a long time to answer calls and, when connected, they make you stay hold for longer times."

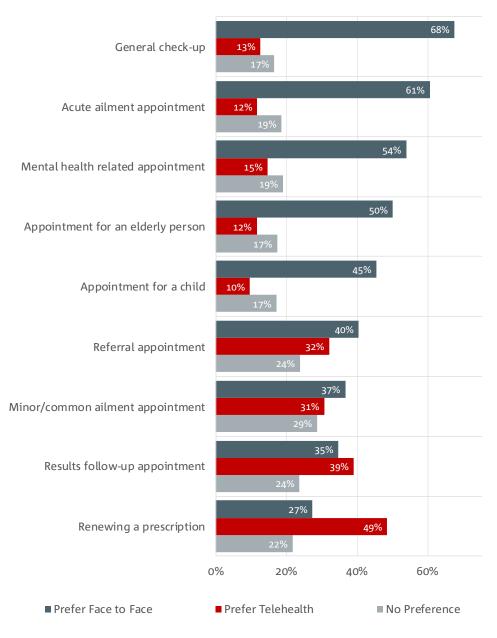
## "Couldn't see the physical problem because video didn't work."

"I felt like the appointment went past a lot quicker than a normal appointment, which may have caused me to feel flustered and not ask all the questions I would have liked to."

"It was very short and to the point. No opportunity given to ask questions or to be assessed as to whether my health had deteriorated. They couldn't see how much I had physically changed since they had last seen me face-to-face. If they had, I think they would have sped up the treatment process."

"My video telehealth was physio. Instead of them being with me while I learnt the exercises and helping me with it, they spent 5 minutes telling me which exercises to do and that was it."

# CONSULTATION PREFERENCES: FACE-TO-FACE VERSUS TELEHEALTH



Finally, we asked Australians if they would prefer telemedicine or telehealth appointments compared to a traditional face-to-face consultation for a number of appointment types.

On average, Australians identified 5 areas where they had a clear preference for face-to-face. These were appointments for a general check-up (68%) or an acute ailment appointment (61%), a mental health-related appointment (54%) or an appointment for an elderly person (50%) or child (45%).

Preferences were more evenly split for referral appointments (40% face-to face; 32% telehealth) and minor or common ailment appointments (37% face-to-face; 31% telehealth). Australians were also split in their preferences for results followup appointments, although there was a slightly stronger preference for telehealth (39%) than face-to-face (35%). There was however a much stronger preference for telehealth (49%) than face-to-face (27%) for renewing a prescription. The highest number of Australians who had no preference was for a minor common ailment appointment (29%), referral appointment (24%), results followup appointment (24%) and a prescription renewal (22%) appointment.

The table on the right shows responses by gender and age and highlights some key differences (note: responses do not sum to 100 because it excludes those who answered n/a).

	Prefer Face-to-Face	Prefer Telehealth	No Preference
Renewing a prescription	on		
Men	34%	42%	21%
Women	21%	54%	22%
18-29	23%	55%	18%
30-49	27%	55%	17%
50-64	23%	49%	25%
65+	37%	31%	30%
Results follow-up appo	pintment		
Men	39%	34%	25%
Women	30%	44%	22%
18-29	30%	45%	21%
30-49	32%	47%	19%
50-64	30%	39%	27%
65+	49%	20%	30%
Minor/common ailme	nt appointment		
Men	42%	28%	27%
Women	31%	34%	30%
18-29	31%	35%	29%
30-49	37%	38%	21%
50-64	32%	30%	34%
65+	46%	15%	36%
Referral appointment			
Men	46%	27%	24%
Women	35%	36%	24%
18-29	50%	16%	31%
30-49	38%	37%	20%
50-64	38%	39%	20%
65+	38%	32%	25%
Appointment for a chi	ld		
Men	46%	11%	18%
Women	45%	8%	16%

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18-29   60%   11%   18%     30-49   49%   19%   23%     50-64   57%   15%   21%     65+   66%   6%   16%     General check-up     Men   69%   11%   16%     18-29   58%   20%   18%     18-29   58%   20%   18%     18-29   58%   20%   18%     30-49   61%   19%   18%     50-64   74%   5%   17%	Men											
30-49     49%     19%     23%       50-64     57%     15%     21%       65+     66%     6%     16% <b>General check-up</b> Men     69%     11%     16%       Women     66%     14%     17%       18-29     58%     20%     18%       30-49     61%     19%     18%       50-64     74%     5%     17%	Women	62%	12%	19%								
50-6457%15%21%65+66%6%16%General check-upMen69%11%16%Women66%14%17%18-2958%20%18%30-4961%19%18%50-6474%5%17%	18-29	60%	11%	18%								
65+     66%     6%     16%       General check-up     11%     16%       Men     69%     11%     16%       Women     66%     14%     17%       18-29     58%     20%     18%       30-49     61%     19%     18%       50-64     74%     5%     17%	30-49	49%	19%	23%								
General check-up     Information     Information       Men     69%     11%     16%       Women     66%     14%     17%       18-29     58%     20%     18%       30-49     61%     19%     18%       50-64     74%     5%     17%	50-64	57%	15%	21%								
Men     69%     11%     16%       Women     66%     14%     17%       18-29     58%     20%     18%       30-49     61%     19%     18%       50-64     74%     5%     17%	65+	66%	6%	16%								
Women     66%     14%     17%       18-29     58%     20%     18%       30-49     61%     19%     18%       50-64     74%     5%     17%	General check-up											
18-29 58% 20% 18%   30-49 61% 19% 18%   50-64 74% 5% 17%	Men	69%	11%	16%								
30-49 61% 19% 18%   50-64 74% 5% 17%	Women	66%	14%	17%								
50-64 74% 5% 17%	18-29	58%	20%	18%								
	30-49	61%	19%	18%								
65+ 82% 3% 12%	50-64	74%	5%	17%								
	65+	82%	3%	12%								

# PART 3: PRIORITISING HEALTH & PREVENTATIVE HEALTH MINDSET

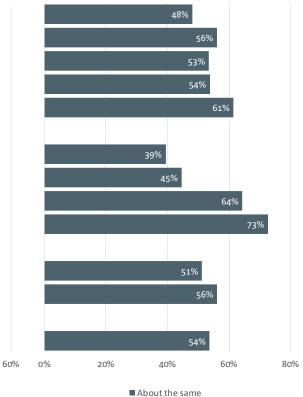


# PRIORITISING HEALTH & PREVENTATIVE HEALTH MINDSET

**PRIOROTISING HEALTH SINCE COVID-19: MORE/LESS** 

#### \$100,000+ p.a 45% \$35-50,000 p.a. 38% 38% \$75-100,000 p.a. 36% \$50-75,000 p.a <\$35,000 p.a. 32% 18-29 49% 46% 30-49 50-64 29% 65+ 25% 43% Men Women 35% All Australians 39% 10% 0% 20% 30% -20% -10% 40% 50% ■ More Less

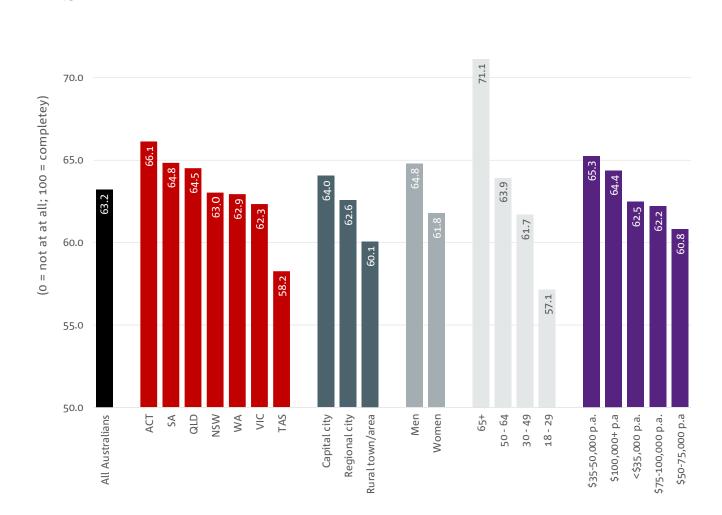
ABOUT THE SAME



A significant number of Australians have placed a higher priority on their health since COVID-19.

Overall, around 4 in 10 (39%) are prioritising their health more since COVID-19, while 54% said the priority on their health was about the same. Encouragingly, only 7% said they were placing less priority on their health. More men (43%) are prioritising their health than women (35%) since COVID-19. A broadly similar number have placed less priority on their health.

By age, around 3 in 4 (73%) people over the age of 65 said their health priorities were unchanged. In contrast around 1 in 2 in the 18-29 (49%) and 30-49 (46%) age groups placed more emphasis on their health, compared to only 25% in the over 65 and 29% in 50-64 age groups. Of some concern, nearly 1 in 10 people in the 65+ (9%) and 50-64 (8%) age groups also said they were placing less emphasis on their health, compared to only 1 in 50 (2%) in the 18-29 age group.



## EXTENT YOU BELIEVE YOU HAVE A PREVENTATIVE MINDSET

Preventative health is described as taking a proactive approach to your own health through exercise, diet, quitting smoking, alcohol and drugs, regular health screening and check-ups, and generally taking steps to ensure your mental and physical health are as good as possible.

75.0

In this survey, we asked Australians to what extent they believe they have a preventative health mindset.

On average, they believe their health mindset is only "moderately" preventative,

scoring 63.2 pts out of a possible 100 (where 100 is completely).

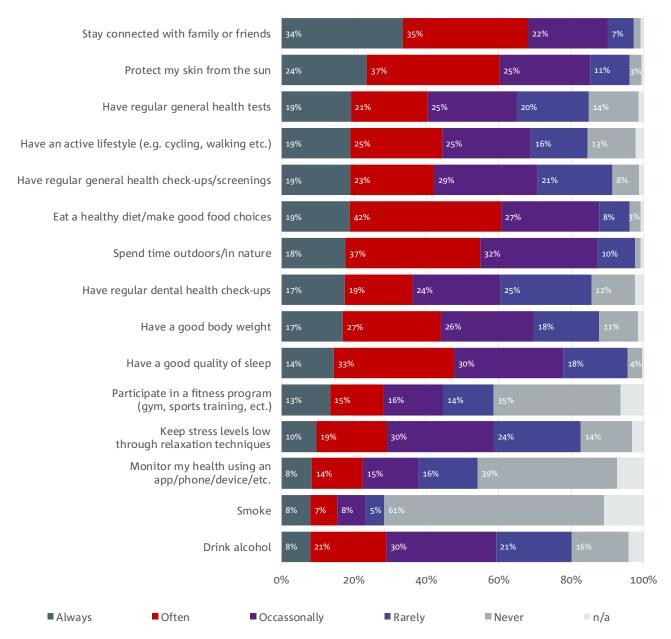
By state, self-reported outcomes were strongest in the ACT (66.1 pts) and somewhat higher than in SA (64.8 pts) and QLD (64.5 pts), the next best states. Outcomes were lowest in TAS (58.2 pts), and significantly below all other states.

There was also a large gap in the preventative health mindset of Australians living in capital cities (64.0 pts) compared to those in rural areas (60.1 pts). Men (64.8 pts) rated their preventative health mindset noticeably higher than women (61.8 pts).

The survey also found a clear relationship between preventative health mindset and age. It was lowest in the 18-29 age group at 57.1 pts and stepped up progressively in each age group to 71.1 pts in the over 65 group. This result may help explain why the health priorities of many older Australians have not changed since COVID-19 preventative measures.

The survey also found a clear relationship between preventative health mindset and age. It was lowest in the 18-29 age group and **stepped up progressively to 71.1 pts in the over 65 group**.

## EFFORTS TO HAVE A PREVENTATIVE HEALTH MINDSET



Where have Australians concentrated their efforts to have a preventative mindset over the past 12 months? Among the positives, almost 7 in 10 stayed connected with family or friends (34% always; 35% often). Around 6 in 10 eat healthy or make good food choices (19% always; 42% often) or protect their skin from the sun (24% always; 37% often). More than half of all people (55%) also spend time outdoors or in nature (18% always; 37% often). Around 7 in 10 also said they never (61%) or rarely smoke (5%) and almost 4 in 10 never (16%) or rarely (21%) drink alcohol.

The main areas where preventative mindset fell short for many included monitoring their health using apps,

phones or other devices (39% never; 16% rarely), participating in fitness programs (35% never; 14% rarely), having regular dental check-ups (12% never; 25% rarely) and regular general health tests (14% never; 20% rarely). The tables below highlights key differences between women and men and by income.

# PREVENTATIVE HEALTH MEASURES BY GENDER

	Always	Often	Occasionally	Rarely	Never
Participate in a fitn	ess program (gym, spo	rts training etc.)			·
<\$35,000 p.a.	7%	10%	11%	15%	47%
\$35-50,000 p.a.	8%	9%	16%	14%	43%
\$50-75,000 p.a.	13%	13%	19%	14%	34%
\$75-100,000 p.a.	15%	14%	18%	14%	35%
\$100,000+ p.a.	18%	20%	18%	14%	27%
Have an active lifes	tyle e.g. cycling, walkii	ng etc.			
<\$35,000 p.a.	17%	18%	24%	16%	23%
\$35-50,000 p.a.	17%	22%	24%	19%	15%
\$50-75,000 p.a.	13%	26%	28%	16%	14%
\$75-100,000 p.a.	20%	28%	21%	15%	14%
\$100,000+ p.a.	23%	29%	26%	14%	7%
Eat a healthy diet/	nake good food choice	25		·	
<\$35,000 p.a.	19%	39%	27%	8%	5%
\$35-50,000 p.a.	28%	38%	22%	7%	3%
\$50-75,000 p.a.	16%	45%	28%	10%	1%
\$75-100,000 p.a.	20%	40%	27%	10%	3%
\$100,000+ p.a.	16%	45%	27%	8%	3%
Have a good body	weight				
<\$35,000 p.a.	13%	25%	24%	20%	13%
\$35-50,000 p.a.	17%	26%	27%	18%	17%
\$50-75,000 p.a.	14%	24%	29%	18%	14%
\$75-100,000 p.a.	19%	30%	26%	14%	19%
\$100,000+ p.a.	19%	30%	24%	18%	19%

	Always	Often	Occasionally	Rarely	Never
Keep stress levels l	ow through relaxat	tion techniques	'		'
<\$35,000 p.a.	11%	11%	8%	11%	8%
\$35-50,000 p.a.	16%	21%	22%	19%	21%
\$50-75,000 p.a.	33%	28%	28%	26%	30%
\$75-100,000 p.a.	21%	22%	24%	24%	27%
\$100,000+ p.a.	16%	12%	15%	17%	12%
Stay connected wit	h family or friends				
<\$35,000 p.a.	34%	27%	25%	8%	34%
\$35-50,000 p.a.	38%	30%	21%	8%	38%
\$50-75,000 p.a.	33%	33%	21%	10%	33%
\$75-100,000 p.a.	34%	35%	23%	5%	34%
\$100,000+ p.a.	31%	40%	21%	7%	31%
Smoke					
<\$35,000 p.a.	8%	6%	9%	6%	57%
\$35-50,000 p.a.	7%	8%	4%	3%	62%
\$50-75,000 p.a.	9%	7%	8%	5%	60%
\$75-100,000 p.a.	10%	9%	9%	6%	57%
\$100,000+ p.a.	8%	8%	10%	6%	63%
Spend time outdoo	ors/in nature				
<\$35,000 p.a.	19%	33%	30%	13%	19%
\$35-50,000 p.a.	17%	40%	31%	10%	17%
\$50-75,000 p.a.	16%	35%	35%	12%	16%
\$75-100,000 p.a.	19%	39%	31%	9%	19%
\$100,000+ p.a.	18%	40%	32%	10%	18%
Have a good qualit	y of sleep				
<\$35,000 p.a.	12%	32%	26%	22%	12%
\$35-50,000 p.a.	18%	34%	25%	20%	18%
\$50-75,000 p.a.	15%	29%	32%	21%	15%
\$75-100,000 p.a.	15%	31%	33%	16%	15%
\$100,000+ p.a.	14%	36%	32%	14%	14%

	Always	Often	Occasionally	Rarely	Never
Protect my skin fro	m the sun				
<\$35,000 p.a.	25%	32%	20%	15%	4%
\$35-50,000 p.a.	25%	39%	23%	9%	2%
\$50-75,000 p.a.	21%	39%	23%	13%	3%
\$75-100,000 p.a.	22%	38%	28%	8%	4%
\$100,000+ p.a.	24%	36%	27%	10%	3%
Drink alcohol					
<\$35,000 p.a.	7%	15%	23%	20%	28%
\$35-50,000 p.a.	7%	17%	32%	24%	15%
\$50-75,000 p.a.	9%	22%	29%	22%	16%
\$75-100,000 p.a.	9%	21%	32%	20%	14%
\$100,000+ p.a.	8%	26%	33%	20%	10%
Have regular gener	ral health check-ups/so	reenings			
<\$35,000 p.a.	24%	23%	29%	13%	24%
\$35-50,000 p.a.	30%	22%	24%	17%	30%
\$50-75,000 p.a.	20%	25%	28%	20%	20%
\$75-100,000 p.a.	15%	24%	30%	22%	15%
\$100,000+ p.a.	13%	24%	30%	25%	13%
Have regular denta	I health check-ups				
<\$35,000 p.a.	18%	14%	22%	24%	17%
\$35-50,000 p.a.	20%	16%	23%	26%	12%
\$50-75,000 p.a.	16%	19%	23%	25%	13%
\$75-100,000 p.a.	15%	21%	23%	26%	14%
\$100,000+ p.a.	18%	22%	26%	25%	9%
Have regular gener	al health tests				
<\$35,000 p.a.	26%	19%	24%	15%	15%
\$35-50,000 p.a.	32%	23%	18%	15%	11%
\$50-75,000 p.a.	18%	24%	29%	16%	12%
\$75-100,000 p.a.	16%	22%	22%	24%	15%
\$100,000+ p.a.	13%	21%	26%	24%	14%

	Always	Often	Occasionally	Rarely	Never				
Monitor my health using an app/phone/device/etc.									
<\$35,000 p.a.	6%	11%	15%	14%	45%				
\$35-50,000 p.a.	6%	14%	11%	13%	45%				
\$50-75,000 p.a.	9%	11%	15%	13%	44%				
\$75-100,000 p.a.	9%	17%	17%	17%	37%				
\$100,000+ p.a.	11%	18%	16%	21%	30%				

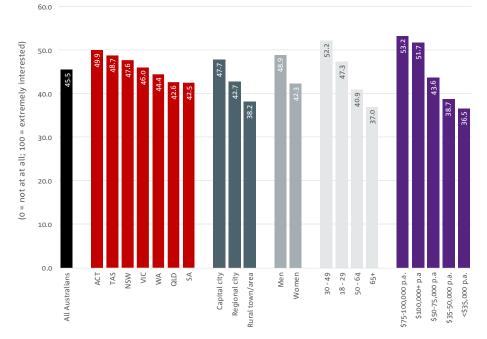
It is possible to be tested for some conditions and diseases even if you have no signs or symptoms of being unwell. These screening tests fall under the banner of preventative medicine because they can help head off future problems and are often referred to as preventative screening.

In this survey, NAB asked Australians how interested they would be in obtaining a preventative health diagnostic test (e.g. genetic testing, MRI scan, etc.) not covered by Medicare or health insurance, but offering a more personalised and comprehensive health assessment.

On average, Australians can at best be described as only "mildly" interested, scoring just 45.5 pts out of 100 (where 100 is extremely interested). Moreover, only 23% of all people said their interest in obtaining a health diagnostic was "high" (i.e. rated their interest 80 points and above).

The level of interest is relatively low across the country, ranging from 49.9 pts in the ACT to 42.5 pts in SA. Australians living in capital cities (47.7 pts) are noticeably more interested than those in rural areas (38.2 pts). Men (48.9 pts) also expressed

INTEREST IN PREVENTATIVE HEALTH DIAGNOSTIC TEST NOT COVERED BY MEDICARE OR HEALTH INSURANCE



much higher levels of interest than women (42.3 pts). By age, interest is highest in the 30-49 group (52.2 pts) and lowest in the over 65 group (37.0 pts), where it is also lowest of all key groups. Those on higher incomes (\$75,000+) are also much more interested in preventative tests than lower income earners.

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