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# NAB Health Insights Special Report

**Australia's Health Scorecard 2023-24  
Part 1: The Healthcare System**

NAB Behavioural and Industry Economics



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# Executive Summary



Australia's health system is considered to be among the best in the world, providing safe and affordable healthcare for all. But do patients agree? Part 1 of this latest NAB Health Insights series explores the state of healthcare in Australia today through the eyes of those who rely upon it. Australians told us about their usage of health services, their experiences with waiting times, access, affordability and overall satisfaction with health professionals and the system as a whole.

In this report you will find actionable data, together with unique insights, to help inform your own practice as you seek to meet the expectations of your patients now and in the future.

First, the good news: Australians are largely satisfied with our healthcare system overall, and this is particularly the case for those of us with an ongoing medical condition. Patient satisfaction for most individual practitioners remains very high too, although it has moderated somewhat over the past year for all practitioners.

Satisfaction with healthcare also varied by region, with the number of very satisfied people higher in capital cities compared to those in regional cities. While this year's survey found that GPs, pharmacies and dentists were again the most commonly visited practitioners, there has been a drop in visitations across several areas, including doctors and pharmacies.

Cost may be a factor here, with Australians reporting a deterioration in affordability for most providers compared with last year. Access to care, too, may play a role in the fall in visitations. While access is still generally good, it has worsened in a number of cases over the year, in particular for public hospitals and psychologists and psychiatrists.

The surge we're seeing in people seeking help for mental health issues no doubt plays into the increased difficulty seeing a psychologist or psychiatrist. When it comes to our mental health, over 1 in 3 Australians told us that, at some point over the past 12 months, they felt they needed professional help for their emotions, stress or mental health.

Just over 1 in 2 got the help they needed, while 1 in 3 didn't seek help.

Almost 1 in 10 Australians identify as current NDIS participants. Around three times as many people on lower incomes find payment processing very difficult compared to those in the higher income group.

This report also includes some pertinent insights into regional and rural healthcare. For instance, for Australians living with an ongoing medical condition, satisfaction generally was lower among those in rural areas compared to those in capitals and the regions. We also saw a fall from 2022 in the scores Australians living in rural areas and regional cities gave for the mental help they received.

These are among the key findings. While there are some areas of concern, it's clear patients continue to have high regard for our healthcare system and its practitioners. It's again been a huge privilege to discover what Australians feel about their healthcare in our 12th year of compiling this report.

I hope you'll find much to enjoy – and think about – as you digest this year's findings.

## **John Avent**

Executive, NAB Health and Medfin, NAB

# Australia's healthcare scorecard



Public perceptions and experiences with healthcare services are important in identifying how well a country's health system is meeting the needs of its population. Expectations can also help frame future demand for health services, funding and payment models. In Part 1 of this latest NAB Health Insights Special Report series, a representative sample of more than 1,000 Australians aged 18 years and above share their experiences and views, providing a 'scorecard' on the state of healthcare in Australia today.

What emerges is a largely positive picture, with some areas for consideration and improvement. Australians are largely satisfied with the healthcare system overall, and this is particularly the case for those with an ongoing medical condition. But there are important differences by gender, age and location. While patient

satisfaction remains very high for most practitioners, it has moderated over the past year, and for all practitioners. Satisfaction is broadly similar among those on lower and higher incomes.

Almost 1 in 10 Australians identify as current NDIS participants. On average, they find the NDIS payment process moderately difficult (just over 1 in 10 find it very difficult). Around three times as many people on lower incomes find payment processing very difficult compared to those in the higher income group.

Visitation has also eased across a number of areas, including doctors and pharmacies. In general, women continue to visit health professionals more than men, as do older Australians, while higher income earners in particular visit dentists more often. Access to care remains generally good, but varies significantly by practitioner

type and has worsened across a number of modalities over the past 12 months. Affordability also varies significantly, and has deteriorated. That said, people on lower incomes continue to score GP affordability somewhat better than those on higher incomes. Many Australians, however, continue to fall well short of dental health recommendations, with 1 in 2 having not visited a dentist

**Australians are largely satisfied with the healthcare system overall. But there are important differences by gender, age and location.**

over the past year, with cost the key reason. And in terms of switching provider, over the past 2-3 years, around 1 in 7 Australians switched GPs because they were dissatisfied in some way, while around 1 in 10 changed their dentist, with younger people most likely to switch health providers.

This year, we put a spotlight on mental health. Almost 1 in 5 Australians had a diagnosed mental health illness or disorder over the past year, and 1 in 3 at some point in their life. Moreover, over 1 in 3 have, at some point over the past 12 months, felt they needed professional help for their emotions, stress or mental health. Fifty per cent had received help and around half of these people waited less than a month. But 1 in 3 of those who had not sought help identified cost as the key reason.

### **How satisfied are Australians with the healthcare system overall?**

While, on average, the system scored 6.5 pts out of 10 (where

10 is completely satisfied), over 1 in 3 (37%) were 'very' satisfied (i.e., scoring 8 pts or higher). Satisfaction did, however, vary across the country and in key demographic groups. By region, the number of very satisfied people ranged from around 4 in 10 (39%) in capital cities to around 3 in 10 (32%) in regional cities and rural areas. More men were very satisfied than women (41% men vs. 33% women). Income does not appear to be a defining factor, with satisfaction scoring 6.8 pts among higher income earners and 6.5 pts for those on lower incomes (while the number of very satisfied people ranged from 41% to 38% respectively). NDIS participants scored above average (6.8 pts), with a larger number (49%) very satisfied with the healthcare system in Australia.

### **How satisfied are Australians with an ongoing medical condition with the care they receive?**

Around 5 in 10 Australians require ongoing treatment or medication

for a medical condition, rising to over 8 in 10 among the over-65s. And for over 8 in 10 people with an ongoing condition, it is a chronic condition. Importantly, those with a medical condition were, on average, quite satisfied (7.4 pts). In addition, almost 6 in 10 (59%) were very satisfied, and only 1 in 14 (7%) not very satisfied (i.e., 3 pts or less). That said, satisfaction was substantially lower among those in rural areas (6.5 pts) compared to capitals (7.6 pts) and regions (7.3 pts). Only around 4 in 10 (44%) people with ongoing health conditions in rural areas were very satisfied, compared to almost 2 in 3 (65%) in capital cities. Men were somewhat more satisfied than women (7.7 pts men vs. 7.1 pts women), with a much higher share of men very satisfied (64% vs. 54%). Satisfaction typically declines with age, ranging from 8.0 pts for the over-65s to 6.4 pts for those aged 18-24, while the number of very satisfied people ranged from almost 7 in 10 (68%) among the over-65s to almost 4 in 10 (39%) for those aged 18-24. Income is a





differentiator – scores are better among the higher group (7.6 pts higher income vs. 6.9 pts lower income), with noticeably more of those on higher incomes also very satisfied (62% vs. 48%). NDIS participants were slightly less satisfied with the care they received than the average Australian (7.2 pts), though approaching 6 in 10 (55%) were very satisfied.

### How satisfied are Australians with health practitioners?

While satisfaction with health professionals remains very high,

**Around 5 in 10 Australians require ongoing treatment or medication for a medical condition.**

it has moderated over the past year, and for all practitioners. Satisfaction was highest for optometrists (8.4 pts vs. 8.5 pts a year ago), followed by chiropractors, osteopaths & physiotherapists (8.3 pts vs. 8.5 pts), private hospitals (8.2 pts vs. 8.4 pts), pharmacies (8.2 pts vs. 8.5 pts), dentists (8.1 pts vs. 8.5 pts), other health providers (8.0 pts vs. 8.6 pts) and vets (8.0 pts vs. 8.4 pts). It was lowest, and was scaled back somewhat, for public hospitals (7.0 pts vs. 7.6 pts), psychologists & psychiatrists (7.4 pts vs. 7.9 pts) and GPs (7.8 pts vs. 8.2 pts). By gender, somewhat higher satisfaction levels were recorded among women for chiropractors, osteopaths & physiotherapists (8.4 pts women vs. 8.0 pts men), and among men for public hospitals (7.3 pts men vs. 6.8 pts women) and psychologists & psychiatrists (7.6 pts vs. 7.2 pts). By age, satisfaction was highest for over-65s for most health providers, except private hospitals (highest among the 55-

64 age group) and psychologists & psychiatrists (equal highest for those aged 35-44 and 45-54). Satisfaction was lowest among the 18-24 age group across all modalities, except chiropractors, osteopaths & physiotherapists (where satisfaction was lowest for those aged 25-34). Importantly, satisfaction by people in lower and higher income groups was broadly similar across most health providers. The gap was widest for psychologists & psychiatrists (7.5 pts higher income vs. 7.0 pts lower income), other health providers (8.5 pts vs. 8.1 pts) and private hospitals (8.3 pts vs. 7.9 pts).

### Has visitation to health practitioners changed?

GPs, pharmacies and dentists were again the most commonly visited health practitioners across Australia. Over 7 in 10 (73%) Australians visited a GP in the past 12 months (down from 78% a year ago). Pharmacy visits dipped even more over the past year to just

over 6 in 10 (61%) from 7 in 10 (70%) the previous year. There was also a small decline in public hospitals (22% vs. 25%) and 1 in 2 (50%) visited a dentist (up from 47%). There was a bigger increase in visitation to optometrists (35% vs. 28%) and a smaller one for specialist doctors (28% vs. 24%). Visitation for all other health practitioners was basically unchanged – vets (17%), chiropractors, osteopaths & physiotherapists (15%), psychologists & psychiatrists (12%), private hospitals (11%) and other health providers (6%). That said, almost twice as many Australians indicated they did not visit any of these practitioners (8%) compared to a year ago (5%). More women visited all health practitioners than men, particularly pharmacies (67% women vs. 54% men), chiropractors, osteopaths & physiotherapists (20% vs. 10%) and GPs (77% vs. 68%). Twice as many men did not visit any practitioner (10% men vs. 5% women). More older Australians visited all health practitioners than younger people, except

public hospitals and psychologists & psychiatrists (where those aged 18-24 lead the way). By income, a much larger number of higher income earners visited a dentist (55% high income vs. 40% low income). This was reversed in the public hospital system (33% low income vs. 18% high income).

### **How many Australians are NDIS participants and how easy is the payment process?**

Around 1 in 10 (8%) survey participants identified as current NDIS participants – ranging from 12% of people in regional cities to 6% in capitals and 14% of those aged 18-24 to 4% of those aged 45-54. By income, 13% of those on lower incomes are part of the NDIS compared to only 5% for higher income earners. On average, Australians find the payment process only moderately easy, with NDIS participants scoring it 6.7 pts (10 = very easy). However, just over 1 in 10 (12%) people said the current payment process was very difficult

(i.e., 3.0 pts or lower) and a further 4 in 10 (40%) found it moderately difficult (i.e., scored between 4.0 pts and 7.0 pts). Around three times as many people in the lower income group found it very difficult compared to those in the higher income group (17% low income vs. 6% high income). A somewhat higher number of people in regional cities (15%) found the payment process very difficult compared to those in capital cities (10%) and rural areas (12%). Almost twice as many women (15%) than men (9%) also found the process very difficult. By age, over 4 in 10 (43%) people in the 45-54 age group said the process was very difficult, as did around 1 in 5 in the over-65 (18%) and 25-34 (17%) age groups.

### **How easy is it to see a health practitioner?**

While access to care remains generally good, it does vary significantly by practitioner type and has worsened in a number of cases over the past



year. Australians believe it is still 'very' easy to see or use a pharmacy (8.8 pts vs. 8.9 a year ago), optometrist (unchanged at 8.5 pts), vet (unchanged at 8.2 pts) and chiropractor, osteopath & physiotherapist (8.2 pts, down slightly from 8.4 pts a year ago). Getting to see or use a dentist (7.7 pts vs. 7.9 pts), other health provider (7.7 pts vs. 8.3 pts), private hospital (7.7 pts vs. 8.0 pts) or GP (unchanged at 7.3 pts) was also considered 'quite' easy, though a little more difficult than a year ago for all these providers, except GPs. Australians reported it was only 'moderately' easy to see or use a specialist doctor (6.5 pts vs. 7.0 pts), public hospital (6.4 pts vs. 7.1 pts) and psychologists & psychiatrists (6.3 pts vs. 6.8 pts), with public hospitals and psychologists & psychiatrists noticeably harder to see than a year ago. By gender, Australians are generally in broad agreement. By age, access was equal highest for those aged 55-64 and over 65 for pharmacies (9.2 pts), optometrists (8.7 pts) and chiropractors, osteopaths & physiotherapists (8.8 pts), and equal highest in the 18-24 and over-65 age groups for specialist doctors (7.3 pts). Access scored best among the over-65s for all other providers, except psychologists & psychiatrists (best for the 35-44 age group) and other health providers (the 18-24 age group). Younger people (the 18-24 age group) reported it was more difficult to use private hospitals (5.9 pts) and see psychologists & psychiatrists (5.9 pts) than any other age groups. Experiences broadly aligned for all providers in the higher and lower income groups with a few



exceptions – chiropractors, osteopaths & physiotherapists (8.4 pts higher income vs. 7.3 pts lower income), specialist doctors (7.3 pts vs. 6.4 pts) and psychologists & psychiatrists (6.4 pts vs. 5.3 pts). Those in regional cities found it somewhat more difficult to see a vet (7.7 pts), other health provider (6.9 pts) or specialist doctor (6.4 pts), and in rural areas public hospitals (6.1 pts). People in regional cities and rural areas found it somewhat harder to see dentists (7.3 pts) and psychologists & psychiatrists (6.1 pts) than in capital cities (6.5 pts).

### How affordable is care?

Affordability continues to vary significantly across providers and has deteriorated for most. Affordability rates highest for public hospitals (8.3 pts, though down from 8.8 pts a year ago), followed by pharmacies (7.6 pts vs. 7.8 pts), GPs (7.5 pts vs. 8.0 pts) and optometrists (7.5 pts vs. 7.8 pts). It was largely unchanged for chiropractors, osteopaths & physiotherapists (6.9 pts vs. 7.0 pts) and private hospitals (6.5 pts vs. 6.4 pts). It deteriorated

significantly for other health providers (6.4 pts vs. 7.4 pts). The least affordable providers (and more so than a year ago) were vets (5.1 pts vs. 5.5 pts), psychologists & psychiatrists (5.9 pts vs. 6.2 pts), specialist doctors (6.1 pts vs. 6.4 pts) and dentists (6.2 pts vs. 6.4 pts). Affordability concerns weighed more heavily on women, particularly for chiropractors, osteopaths & physiotherapists (6.7 pts women vs. 7.3 pts men), private hospitals (6.0 pts vs. 7.1), other health providers (5.9 pts vs. 6.9 pts), dentists (6.0 pts vs. 6.5 pts), specialist doctors (6.6 pts vs. 7.1 pts), psychologists & psychiatrists (5.7 pts vs. 6.4 pts) and vets (4.5 pts vs. 6.2 pts). By age, affordability scored highest for the over-

**Affordability continues to vary significantly across providers and has deteriorated for most since last year.**





65s for all providers apart from private hospitals (where the 25-34 age group scored it best) and specialist doctors (the 18-24 age group). Affordability scored lowest for young people (18-24 age group) for public hospitals, pharmacies, GPs, optometrists, chiropractors, osteopaths & physiotherapists, other health providers and psychologists and psychiatrists. The 35-44 and 45-54 age groups rated vets least affordable, the 35-44 age group dentists and the 45-54 age group private hospitals and specialist doctors. Importantly, people on lower incomes scored affordability somewhat better than the higher income group for GPs (8.0 pts lower income vs. 7.4 pts higher income), private hospitals (7.2 pts vs. 6.2 pts) and other health providers (6.9 pts vs. 6.1 pts).

### **How common is switching health providers?**

Over the past 2-3 years, around 1 in 7 (14%) Australians switched GP because they were dissatisfied in

some way, and around 1 in 10 (8%) changed their dentist. Far fewer (5%) switched specialist doctor or pharmacy, and even fewer their optometrist (4%), psychologist or psychiatrist (3%), chiropractor, osteopath or physiotherapist (2%), vet (2%) or other health provider (2%). Behaviours were broadly the same by gender, except for GPs, with somewhat more women changing than men (17% women vs. 12% men). Behaviours were also similar in higher and lower income groups, except for switching GPs, where somewhat more people in the higher income group switched (16% higher income vs. 12% lower income). Changing health providers is much more common among younger people for all health providers. While over 1 in 5 people in the 18-24 and 25-34 age groups (21% and 22% respectively) switched GP, just 1 in 14 (7%) did so among the over-65s. For dentists, it ranged from 20% in the 18-24 age group and 13% in the 25-34 and 35-44 age groups to 2-4% in all other age groups. A similar

trend was evident with specialist doctors, with 15% in the 18-24 and 10% in the 25-34 age groups switching compared to 2-4% in all other groups. Noticeably more in the 18-24 and 25-34 age groups also switched pharmacies (10%) and psychologist or psychiatrist (7%). While almost 9 in 10 (85%) Australians over 65 had not switched any health professional, this compares to just 1 in 2 (50%) among the 18-24 age group.

### **How often do Australians visit a dentist and why don't we visit?**

The Australian Dental Association (ADA) recommends all children and adults should have regular dental check-ups every six months, even if their teeth are in good shape. Many Australians continue to fall well short of these recommendations, with 1 in 2 (50%) not visiting a dentist in the past year – up from 47% a year ago. Cost was the key reason (for 49% of people), followed by

not seeing a reason to visit (31%), anxiety/fear (22%), lack of time (18%), concerns around COVID (13%), embarrassment (9%) and forgetting to book a check-up (8%). Cost was the key reason for not visiting across the country, though much more so in capital (54%) than regional cities (38%). More people in regional and rural areas identified no need to visit, anxiety or fear of dentists, or lack of time than in capital cities. Concern around COVID was almost twice as common in regional cities (11%). Around 1 in 2 men (48%) and 1 in 2 women (50%) said cost was the main reason. Significantly more men said they did not visit because they did not need to (35% men vs. 26% women), while noticeably more women identified anxiety or fear (26% women vs. 18% men), lack of time (20% vs. 16%) and concern around

COVID (15% vs. 10%). Cost was also the key reason in most age groups, except those aged 18-24 (lack of time) and the over-65 age group (no need), and was particularly significant in the 35-44 (61%) and 45-54 (59%) age groups. A much higher number of over-65s said they did not need to (52%), while lack of time impacted noticeably more Australians in the 18-24 (26%), 45-54 (24%) and 25-34 (22%) age groups. Embarrassment was a much bigger issue in the 25-34 age group (17%), as was forgetting to book an appointment (16%). A much lower number of over-65s did not visit because of lack of time (5%) and embarrassment (1%), in the 35-44 age group because of COVID concerns (7%) and in the over-65 (2%) and 45-54 age groups (3%) forgetting to book a check-up. Significantly more Australians in the higher income group did not

**Changing health providers is much more common among younger people for all health providers.**

visit because of cost (52% higher income vs. 46% lower income), lack of time (22% vs. 13%) or because they forgot to book (14% vs. 5%), but significantly more in the lower income group because there was no need to visit (34% lower income vs. 23% higher income). Far fewer people with private health cover were put off by cost compared to those with no cover (38% with private cover vs. 56% without private cover).





# Chapter 1: Mental health in focus

## How many Australians have been diagnosed with a mental health disorder and how many believe they need professional help?

Around 1 in 5 (18%) Australians report being diagnosed with a mental health illness or disorder in the past 12 months and almost 1 in 3 (32%) at some point in their life. While there is much debate whether rates of mental health disorders are rising, it is clear that the greater de-stigmatisation of mental health issues has resulted in a surge in people seeking help with a resulting rise in treatment rates. Over 1 in 3 (36%) Australians at some point over the past 12 months felt they needed professional help for their emotions, stress or mental health.

### How many people received the mental health support they believed they needed?

1 in 2 got help, while 15% were waiting to see someone. Around 1 in 3 (32%) had not sought help. Around twice as many people in regional cities and rural areas (1 in

5) than in capital cities (1 in 10) did not get help but had reached out and were waiting to see someone. Over 1 in 3 (36%) in capital cities had not reached out, compared to 1 in 4 (25%) in regional cities. More women got help than men (54% women vs. 47% men), but more men reached out and were waiting to see someone (17% men vs. 13% women) or had not sought any help (34% vs. 30%). Over 7 in 10 (71%) people over 65 got help – twice as many as in the 55-64 age group (36%). Around 6 in 10 in the 18-24 (59%) and 45-54 (55%) age groups also got help, compared to around 1 in 2 (48%) in the 25-34 and over 4 in 10 (41%) in the 35-44 age groups. Far more people in the 25-34 age group (24%) were waiting to see someone than in any other age group, while 1 in 2 in the 55-64 (50%) and around 1 in 2 in the 35-44 (48%) age groups did not seek help, compared to around 1 in 5 (18%) in the over-65 age group and around 1 in 3 in all other age groups. A broadly similar number got help in higher and lower income groups (around 6 in 10), but almost twice as many in the lower income group were waiting to see someone (15% lower income vs. 8%

**The greater de-stigmatisation of mental health issues has resulted in a surge in people seeking help.**

higher income), while somewhat more in the higher income group did not seek any help (34% higher income vs. 26% lower income).

### How long did it take to access the mental health support needed?

While around 1 in 2 waited less than a month (27% less than two weeks and 24% two weeks to less than a month), over 4 in 10 endured much longer wait times – from one month to more than six months (20% waited 1-2 months, 11% 2-6 months and 11% over six months). Patient experiences did, however, vary widely across demographic groups. By region, over 1 in 3 (36%) in regional cities accessed support within two weeks, compared to just 1 in 5 (22%) in rural areas. 1 in 4 in rural areas (25%) and regional cities (25%) waited for more than 2 months, compared to almost 1 in 5 (19%) in capitals. Slightly more women said they waited 1-2 months (22% women vs. 18% men). Wait times to access the care varied more widely by age. In the 55-64 age group 1 in 2 (50%) waited less than two weeks, compared to just 1 in 5 (19%) in the 45-54 and 25-34 age groups. Wait times of two weeks to one month were somewhat higher in the 25-34 (32%) and 35-44 (31%)



age groups, and wait times of six months or more were noticeably higher for younger people aged 18-24 (18%) than any other age group. Though around 1 in 2 people in both the lower (53%) and higher (50%) income groups waited less than a month to receive care, almost twice as many in the lower income group waited six months or more (13% lower income vs. 7% higher income).

### How did they access treatment?

Overwhelmingly, face-to-face, with 8 in 10 (80%) Australians consulting this way. Just over 1 in 5 (22%) used videoconferencing and just over 1 in 10 (12%) a telephone helpline such as Lifeline; 7% used email or a webchat advice line such as headspace online. Slightly more people in capital cities (82%) were treated face-to-face, somewhat more in rural areas via videoconferencing (27%), and in capital and regional cities (13%) a telephone advice line. Around twice as many in rural areas (11%) accessed help via email or a webchat helpline. Noticeably more women accessed treatment face-to-face (85% women vs. 73% men) and significantly more men by videoconferencing (28% men vs. 19% women) or telephone advice line (15% vs. 10%). Access to treatment varied more widely by age. Face-to-face interactions were most prevalent among the over-65s (89%) and least so in the 55-64 age group (69%). Videoconferencing was mostly used by around 1 in 3 people in the 35-44 and 25-34 (35% and 32% respectively) age groups, and telephone advice lines by 1 in 4 (25%) in the 55-64 and around 1 in



**Those who obtained professional mental health help, on average, scored it a solid 7.3 points out of 10.**

5 (18%) 18-24 age groups. Almost twice as many in the 18-24 age group sought treatment by email or webchat advice line (12%) compared to any other age group. More people on higher incomes sought treatment face-to-face (84% higher income vs. 75% lower income), while more in the lower income group used email or a webchat advice line (9% lower income vs. 5% higher income).

### How helpful was the care provided?

Those who obtained professional help, on average, scored it a solid 7.3 pts out of 10 (where 10 is extremely helpful), though this was down slightly from 7.5 pts a year ago. Over 1 in 2 (51%) said it was 'very' helpful (8+ pts), also down slightly. By region, those who rated it very helpful was highest and rose among those in capital cities (57% this year vs. 53% a year ago), but fell noticeably in rural areas (46% vs. 55%) and regional cities (42% vs. 53%). More men found it very helpful, compared to women (53% men vs. 50% women). By age, it increased and was highest in the 35-44 (62% this year vs. 56% last year) and 25-34 (57% vs. 52%) age groups, but largely steady in most other groups. The 45-54 age group was the outlier, with the number who said it was very helpful falling sharply to just 39% (58% in 2022). The number of people in the lower income group who

said it was very helpful increased in 2023 (55% this year vs. 50% last year), but fell noticeably in the higher income group (48% vs. 58%).

### For those waiting for care how long has it been?

On average, they have been waiting 18.7 weeks or just over four months. Wait times were typically longer in capital (20.2 weeks) and regional (19.1 weeks) cities compared to rural areas (15.6 weeks). Men were waiting longer than women (19.9 weeks for men vs. 17.3 weeks for women). Average wait times were also much longer in the 45-54 (34.6 weeks) and over-65 (33.5 weeks) age groups, particularly when compared to the 18-24 (8.8 weeks) and 25-34 (13.9

weeks) age groups. Australians in the lower income group were also enduring somewhat longer wait times to be seen than those in the higher income groups (20.4 weeks for lower incomes vs. 16.1 weeks for higher incomes).

### Why do Australians needing help not seek it?

The most common reason for over 1 in 2 (54%) people was that they felt they could manage on their own. Cost was also a key consideration for over 1 in 3 (34%) people, while over 1 in 5 (21%) simply didn't know what to do or who to see and around 1 in 10 were unable to help themselves or couldn't find anyone to help them (8% and 7% respectively). Being able

to manage alone was the main reason for not seeking help in most groups, though by somewhat more people in regional cities than rural areas (58% regional city vs. 45% rural area), men (59% men vs. 49% women), and in the 45-54 age group (59%) than in the 25-34 and 55-64 age groups (50%). Most people in the higher income group also said the main reason was they could manage themselves (59%), but in the lower income group cost was the main reason (56%). Cost was also a much bigger issue in rural areas (40%) than other regions, and for women than men (40% women vs. 28% men), but much less an issue in the age groups between 18 to 44 than in older age groups.



A woman with dark hair tied back, wearing a yellow and black athletic top, is shown in profile from the waist up. She is stretching her arms, with her hands clasped together above her head. The background is a blurred gym setting with structural beams. A trail of white, star-like sparkles follows the right side of her arms and extends downwards. The text is overlaid on the bottom left of the image.

**Chapter 2:**  
**How satisfied are  
Australians with  
their healthcare?**

## Australia's health system is largely considered to be one of the best in the world, providing safe and affordable healthcare for all Australians.

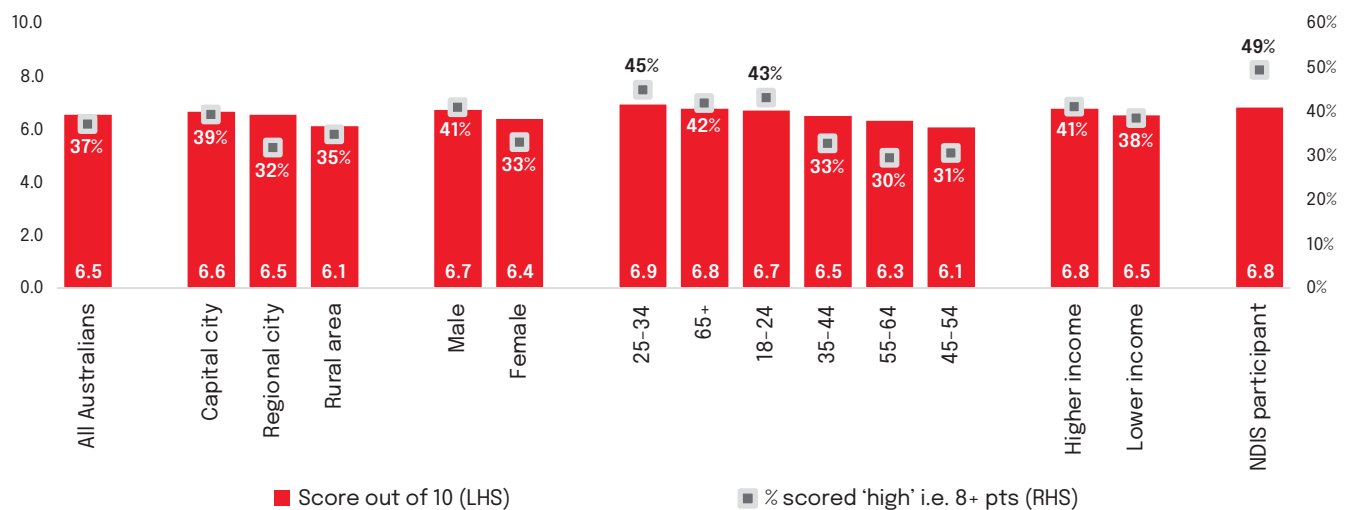
Since 2004, The Commonwealth Fund (a private US foundation) has produced reports comparing healthcare systems in high-

income countries using survey and administrative data from the OECD and WHO based on five themes – access to care, the care process, administrative efficiency, equity and healthcare outcomes.

In its most recent 2021 report, Australia was ranked third top-performing overall, behind Norway and the Netherlands. But are

Australians satisfied with the local healthcare system? Our survey findings suggest only moderately so. When Australians were asked to mark their satisfaction, on average, they scored a moderate 6.5 pts out of 10 (10 = completely satisfied). Moreover, only just over 1 in 3 (37%) indicated they were 'very' satisfied (i.e., scored 8 pts or higher).

**Figure 1: How satisfied are you with healthcare in Australia?**



Satisfaction with healthcare in Australia did, however, vary somewhat across the country and in key demographic groups. By region, it ranged from 6.6 pts in capital cities to 6.1 pts in rural areas, with the number of very satisfied people ranging from almost 4 in 10 (39%) in capital cities to almost 1 in 3 (32%) in regional cities. Men (6.7 pts) were slightly more satisfied than women (6.4 pts), with the number of very satisfied men also noticeably higher than women (41% men vs. 33% women).

We did not find a direct correlation with age, with scores extending from 6.9 pts in the 25-34 age group to 6.1 pts in the 45-54 age group. Whereas over 4 in 10 in the 25-34 (45%), 18-24 (43%) and over-65 (42%) age groups were very satisfied with healthcare in Australia, this dropped to 3 in 10 in the 55-64 (30%) and 45-54 (31%) age groups.

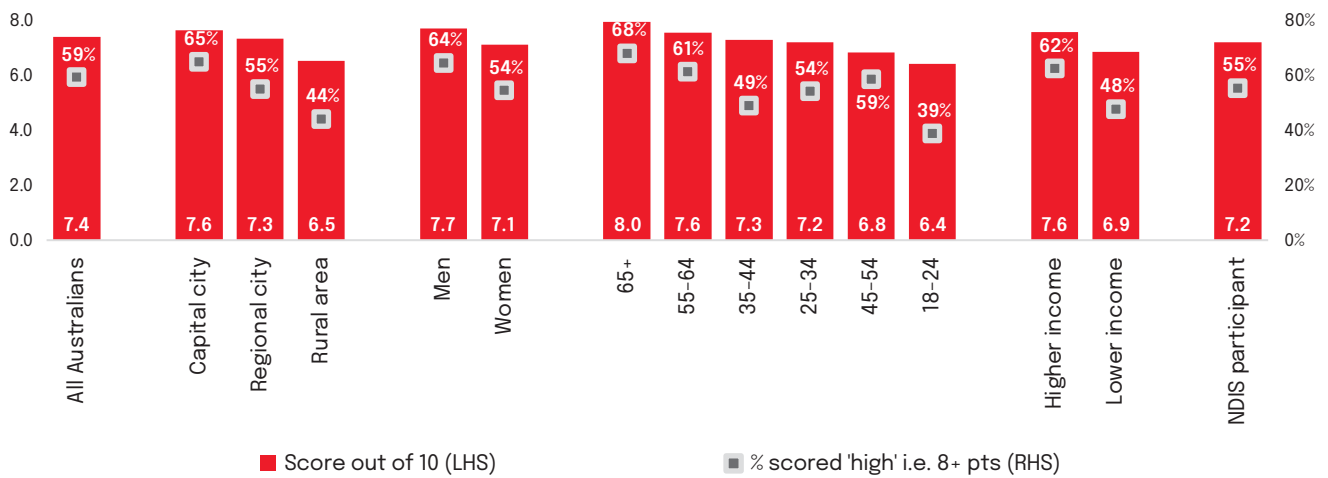
Income was also not an important determining factor, with satisfaction levels spread narrowly from 6.8 pts in the higher income group to 6.5 pts in the lower income group, and the number of very satisfied people

**Satisfaction with healthcare in Australia ranged from 6.6 points in capital cities to 6.1 points in rural areas.**

ranging from just 41% to 38% respectively. NDIS participants scored above average (6.8 pts), with almost 1 in 2 (49%) very satisfied with healthcare in Australia.



**Figure 2: Satisfaction with the care you are receiving for your condition**



Patient satisfaction is an important and commonly used indicator for measuring the quality in healthcare. NAB's survey suggests Australians are somewhat more satisfied with the care they're receiving for their condition than healthcare overall, scoring a much higher 7.4 pts. In addition, almost 6 in 10 (59%) were very satisfied with their care, and only 1 in 14 (7%) not very satisfied (i.e., scored 3.0 pts or less).

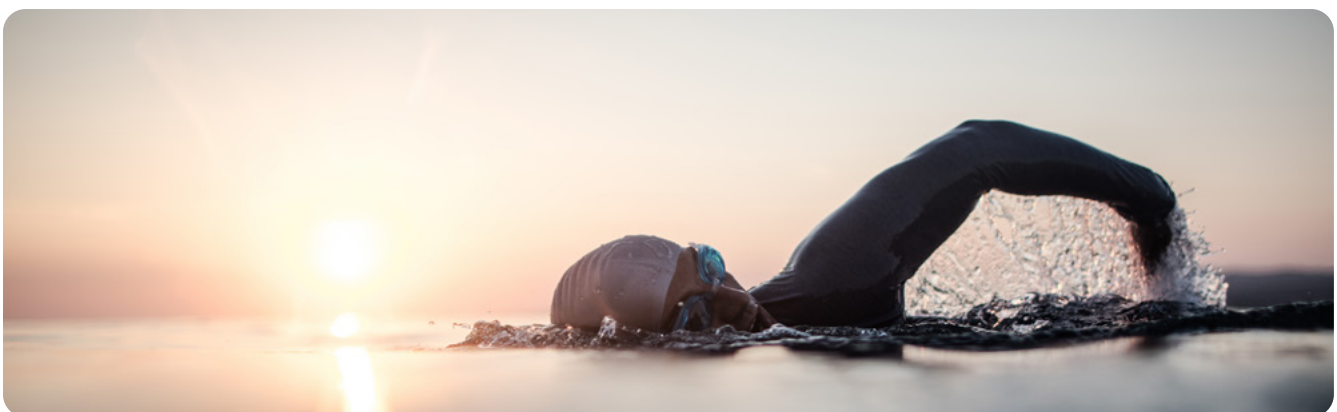
Satisfaction with care received was substantially lower in rural areas (6.5 pts) than in capital (7.6 pts) and regional (7.3 pts) cities. Moreover, just over 4 in 10 (44%) in rural areas were very satisfied,

compared to almost 2 in 3 (65%) in capital cities. Men were somewhat more satisfied than women (7.7 pts men vs. 7.1 pts women), with a much higher number of men also very satisfied (64% vs. 54%).

Satisfaction typically fell with age, from 8.0 pts in the over-65 age group stepping down in most age groups to 6.4 pts in the 18-24 age group, and the number of very satisfied people spread from almost 7 in 10 (68%) in the over-65 age group to just under 4 in 10 (39%) in the 18-24 age group. The 45-54 age group was the outlier, reporting the second lowest level of satisfaction with the care they received (6.8 pts)

– though almost 6 in 10 (59%) in this group were very satisfied.

Income was a bigger differentiator when it came to satisfaction with the care Australians received. It was somewhat better in the higher than lower income group (7.6 pts higher income vs. 6.9 pts lower income), with noticeably more people in the higher income group also very satisfied (62% vs. 48%). NDIS participants were less satisfied with the care they received than the average Australian (7.2 pts), though approaching 6 in 10 (55%) were very satisfied.



## Rating the NDIS payment process

The National Disability Insurance Scheme (NDIS) provides funding to eligible people with disability to gain more time with family and friends; greater independence; access to new skills, jobs or volunteering in their community; and an improved quality of life. It also connects anyone with disability to services in their community, including doctors, community groups, sporting clubs, support groups and schools. Around 1 in 10 (8%) survey participants identified as current NDIS participants – ranging from 12% in regional cities to 6% in capital cities, 14% in the 18-24 age group to 4% in the 45-54 age group, and 13% in the lower income group to 5% in the higher income group.

There are two options to pay for supports with NDIS funding – making a payment request then paying the provider, or paying the provider then making a

payment request. But how easy is the current payment request process? The survey suggests it's only moderately easy, with NDIS participants scoring 6.7 pts (10 = very easy). However, just over 1 in 10 (12%) people said the current payment process was very difficult (i.e., 3.0 pts or lower) and a further 4 in 10 (40%) found it moderately difficult (i.e., scored between 4.0 pts and 7.0 pts).

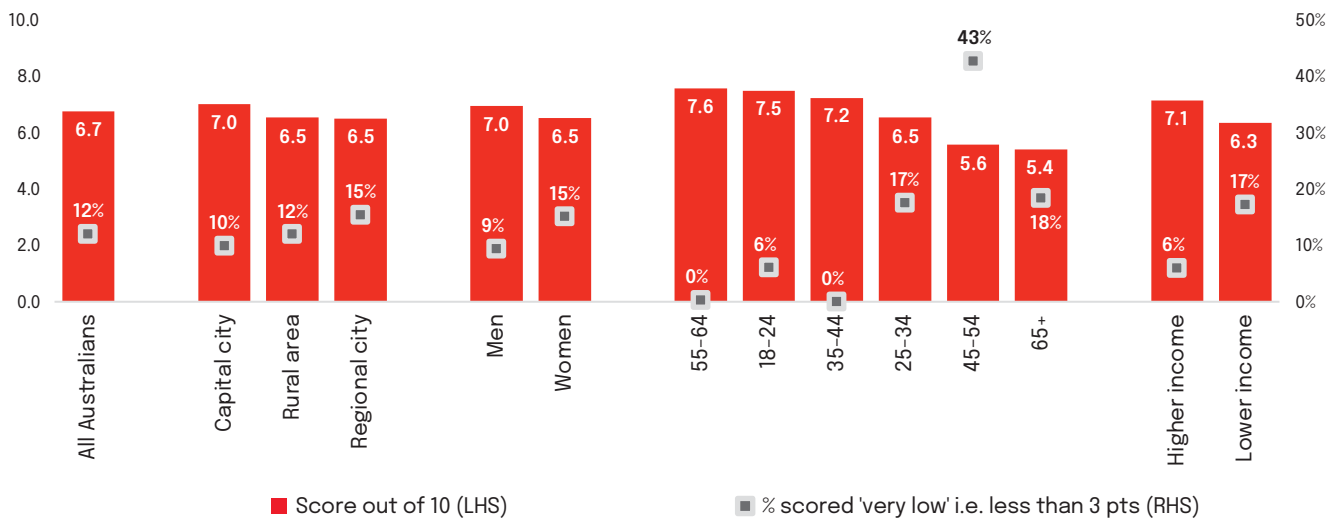
Australians in regional cities and rural areas (6.5 pts) found it more difficult than those in capital cities (7.0 pts), as did women compared to men (6.5 pts for women vs. 7.0 pts for men). It was also much more difficult for people aged over 65 (5.4 pts) compared to those in the 55-64 (7.6 pts) and 18-24 (7.5 pts) age groups, and in lower than higher income groups (6.3 pts lower income vs 7.1 pts higher income).

The survey also revealed a somewhat higher number in regional cities (15%) who found the

payment request process very difficult compared to those in capital cities (10%) and rural areas (12%). Almost twice as many women (15%) than men (9%) also found the process very difficult. By age, over 4 in 10 (43%) people in the 45-54 age group said the process was very difficult, as did almost 1 in 5 in the over-65 (18%) and 25-34 (17%) age groups. Around three times as many people in the lower income group also found it very difficult compared to those in the higher income group (17% lower income vs. 6% higher income).

**Just over 1 in 10 people said the current NDIS payment process was very difficult.**

**Figure 3: Ease of current NDIS payment request process**





# Chapter 3: Mental health

**The WHO defines mental health as a state of mental wellbeing that enables people to cope with the stresses of life, realise their abilities, learn well and work well, and contribute to their community.**

It is an integral component of health and wellbeing that underpins our individual and collective abilities to make decisions, build relationships and shape the world we live in. Looking after our mental wellbeing is as important as keeping our physical body healthy.

Many Australians struggle with mental health illness or disorders (such as depression and anxiety and personality, eating, trauma-related and substance abuse disorders, etc). The NAB 2023 Health survey found almost 1 in 5 (18%) Australians had a diagnosed mental health illness or disorder in the past 12 months and almost 1 in 3 (32%) have been diagnosed at some point in their life.

In addition, over 1 in 3 (36%) have at some point over the past 12 months felt they needed professional help for their emotions, stress or mental health – though this was down somewhat from the 43% reported in the 2022 survey.

While a large number of Australians felt they needed professional help at some point, only 1 in 2 (51%) actually got the help they needed, and 15% had not, but had reached out and were waiting to see someone. Almost 1 in 3 (32%) did not seek any help.

Slightly more Australians in regional cities (54%) got help than in rural areas (51%) and capital cities (50%). Around twice as many in regional cities and rural areas (1 in 5) than capital cities (1 in 10) did not get help but had reached out and were waiting to see someone. Over 1 in 3 (36%) in capital cities had not reached out, compared to 1 in 4 (25%) in regional cities.

**Over 1 in 3 Australians have at some point over the past 12 months felt they needed professional help for their emotions, stress or mental health.**

Noticeably more women got help than men (54% women vs. 47% men), but more men reached out and are waiting to see someone (17% men vs. 13% women) or had not sought any help (34% vs. 30%).

Over 7 in 10 (71%) people in the over-65 age group got help, twice as many than in the 55-64 age group (36%). Around 6 in 10 in the 18-24 (59%) and 45-54 (55%) age groups also got help, compared to around 1 in 2 (48%) in the 25-34 and over 4 in 10 (41%) in the 35-44 age groups. Far more people in the 25-34 age group (24%) were waiting to see someone than in any other age group, while 1 in 2 (50%) in the 55-64 and almost 1 in 2 (48%) in the

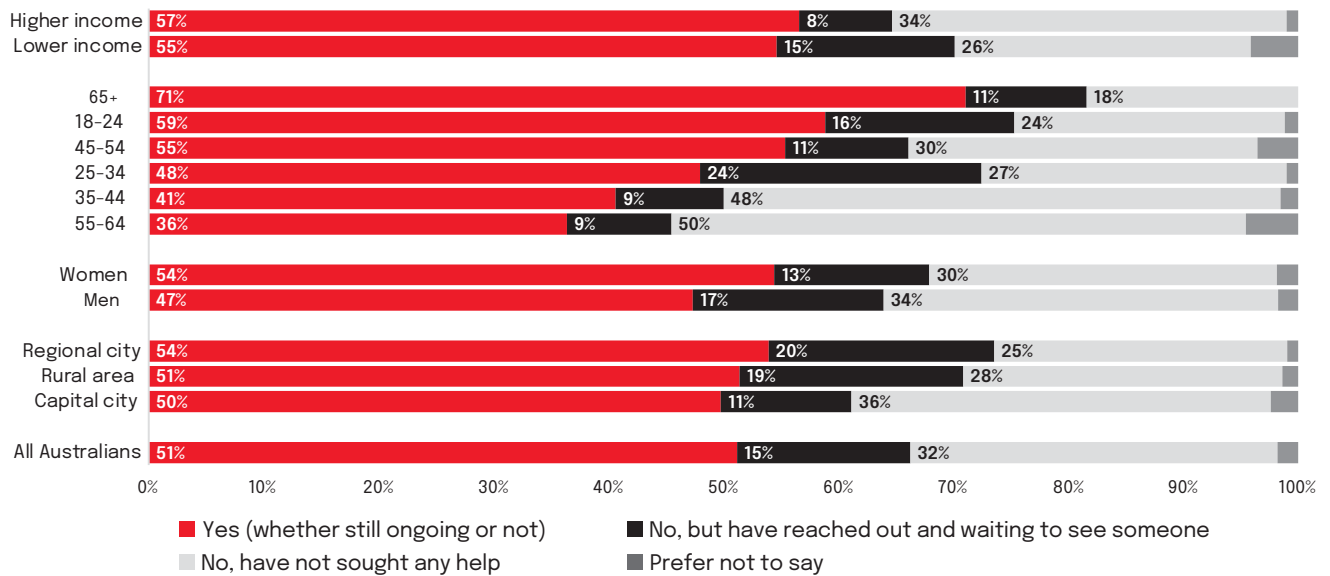
35-44 age groups did not seek help, compared to around 1 in 5 (18%) in the over-65 group and around 1 in 3 in all other age groups.

A broadly similar number got the help they need in higher and lower income groups (around 6 in 10), but almost twice as many in the lower income group were waiting to see someone (15% lower income vs. 8% higher income), while somewhat more in the higher income group did not seek any help (34% higher income vs. 26% lower income).

Australia's mental health sector has been under pressure since the



**Figure 4: Did you get the professional help you needed for your emotions, stress or mental health?**



pandemic. Research conducted by The Australian Psychological Society (APS) found almost two-thirds of patients had to wait more than 12 weeks to receive care in the year to mid-2022, while 1 in 3 (33%) psychologists were unable to

see new clients due to heightened demand (up from over 1 in 5 or 22% the previous year). The Australian Bureau of Statistics (ABS) 2021-22 Patient Experiences report also found that of the 18.5% of people who needed to see a health

professional for their mental health, almost 4 in 10 (39%) delayed or did not see one when needed.

When NAB asked Australians who got the professional help they needed for their emotions, stress or mental health over the past 12 months how long it took to access the care or support they needed, many reported having to endure extended wait times. The results showed that while around 1 in 2 waited less than a month (27% less than two weeks, 24% two weeks to less than a month), over 4 in 10 endured much longer wait times, from one month to more than six months (20% waited 1-2 months, 11% waited 2-6 months and 11% waited over six months).

Patient experiences did, however, vary widely across demographic groups. By region, over 1 in 3 (36%) in regional cities accessed support within two weeks, compared to just over 1 in 5 (22%) in rural areas. We



also noted that 1 in 4 (25%) in rural areas and regional cities waited for more than two months, compared to 1 in 5 (19%) in capital cities.

Women and men experienced broadly similar wait times in most time frames – though slightly more women than men said they waited 1-2 months (22% vs. 18%). Wait times to access the care varied more

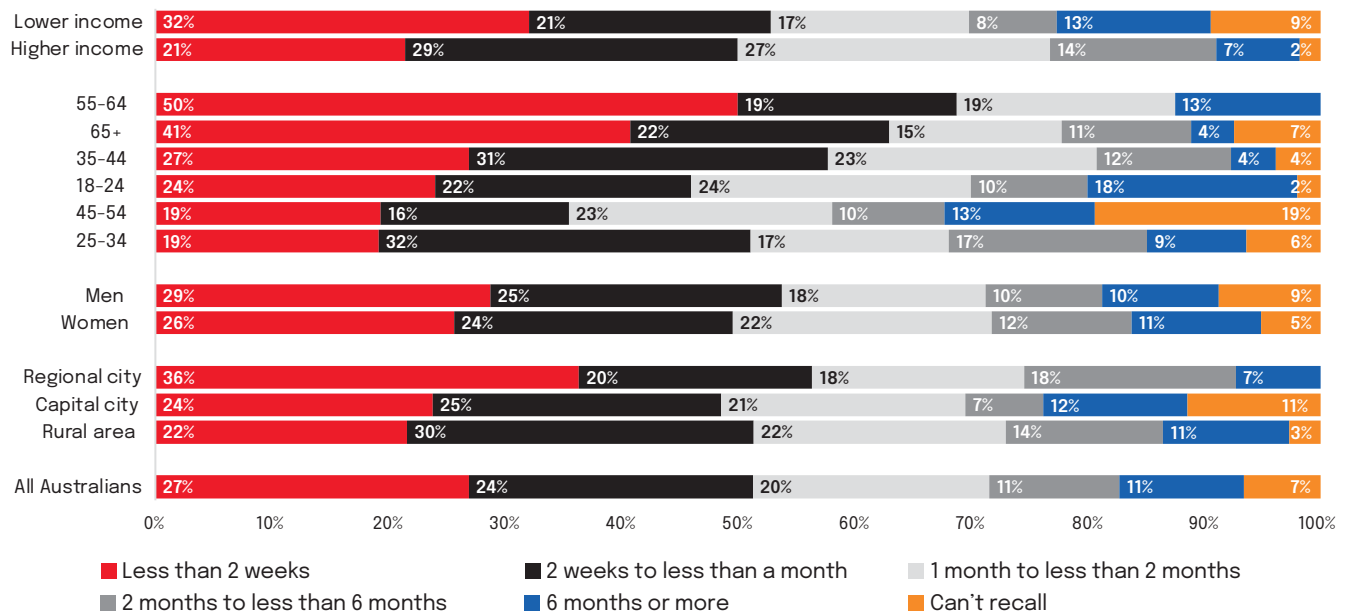
widely by age. Whereas 1 in 2 (50%) in the 55-64 age group waited less than two weeks, this fell to just 1 in 5 (19%) in the 45-54 and 25-34 age groups. Wait times of two weeks to one month were somewhat higher in the 25-34 (32%) and 35-44 (31%) age groups, and wait times of six months or more noticeably higher for people in the 18-24 age group (18%) than any other age group.

Though around 1 in 2 people in both the lower (53%) and higher (50%) income groups waited less than a month to receive care, almost twice as many in the lower group waited six months or more (13% lower income vs. 7% higher income).

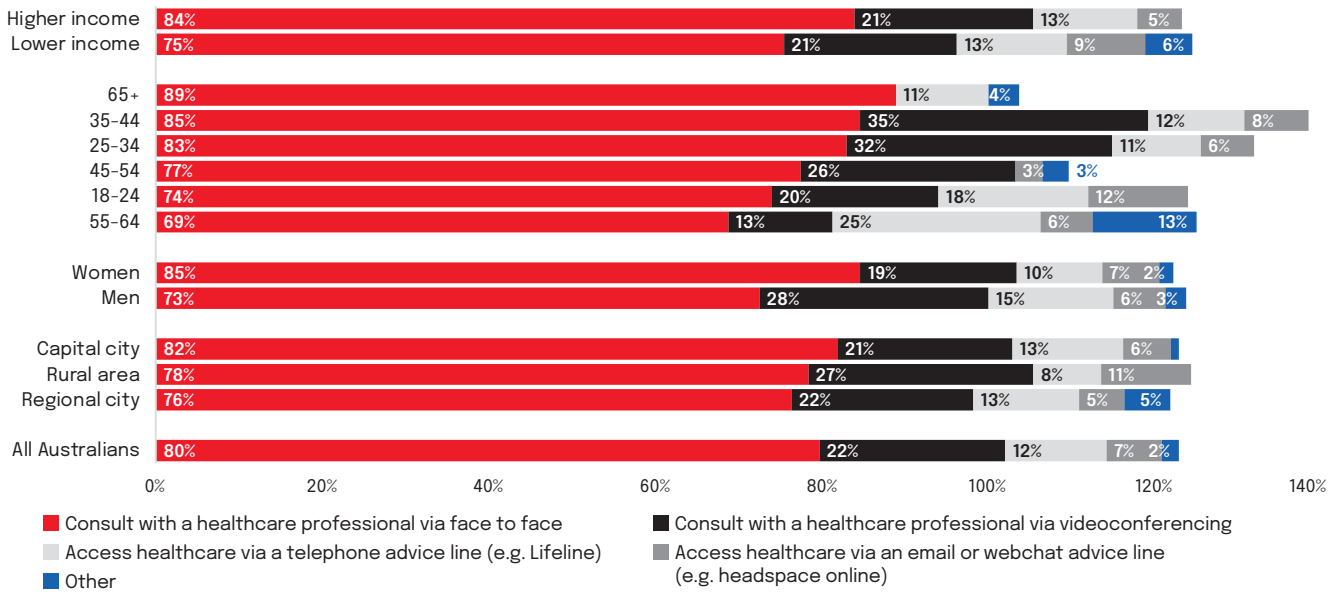
**Over 1 in 3 Australians in regional cities accessed mental health support within two weeks, compared to just over 1 in 5 in rural areas.**



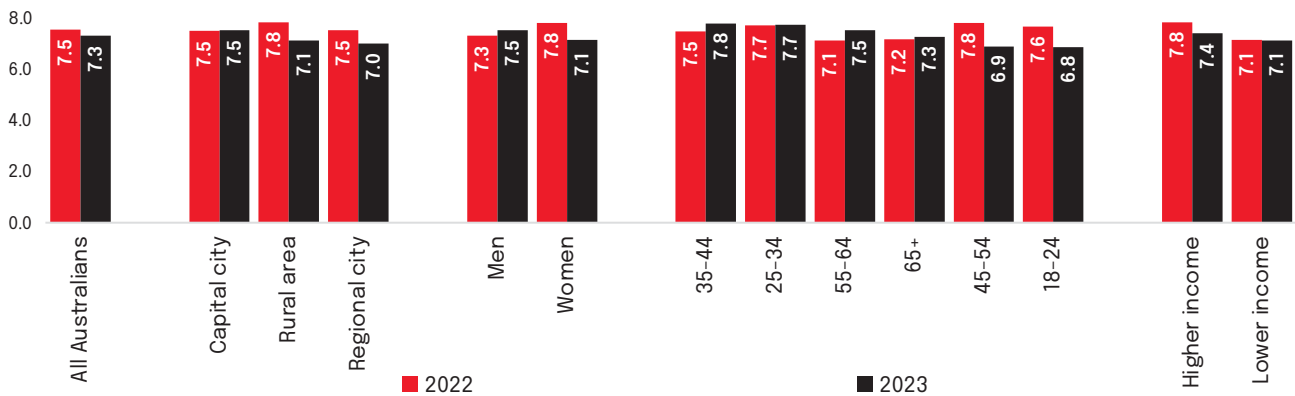
**Figure 5: How long did it take to access the support/care you needed?**



**Figure 6: How did you access treatment?**



**Figure 7: How helpful was the help you received in assisting you to manage your emotions, stress or mental health? (score out of 10)**



Australians who got professional help were also asked how they accessed treatment. Overwhelmingly, 8 in 10 (80%) consulted with a healthcare professional face-to-face. Just over 1 in 5 (22%) consulted via videoconferencing, around 1 in 10 (12%) through a telephone helpline such as Lifeline, and 7% by email or webchat advice line such as headspace online. Slightly more people in capital cities (82%) accessed treatment

face-to-face, somewhat more in rural areas via videoconferencing (27%), and in capital and regional cities (13%) through a telephone advice line. Around twice as many in rural areas (11%), however, accessed help via email or a webchat helpline.

Noticeably more women than men accessed treatment face-to-face (85% women vs. 73% men), but much more men by videoconferencing (28% men

vs. 19% women) or telephone advice line (15% vs. 10%). Access to treatment varied more widely by age. Face-to-face interactions were most prevalent in the over-65 group (89%) and least so in the 55-64 age group (69%). Videoconferencing was most widely used by around 1 in 3 people in the 35-44 (35%) and 25-34 (32%) age groups, and telephone advice lines by 1 in 4 (25%) in the 55-64 age group and almost 1 in 5 (18%) in the 18-24 age group.

Almost twice as many in the 18-24 age group sought treatment by email or webchat advice line (12%) than did any other age group. More people in the higher income group accessed treatment face-to-face (84% higher income vs. 75% lower income), but more in the lower income group via email or webchat advice line (9% lower income vs. 5% higher income).

Mental health is as important as physical health, and it's important to seek professional help when struggling with a mental health concern. A mental health professional can provide the support and resources needed to help manage mental health and improve overall wellbeing. In this survey, we asked Australians who had sought professional help how helpful it was in assisting them to manage their emotions, stress or mental health.

On average, they scored the professional help received 'quite helpful' at a solid 7.3 pts out of 10 (where 10 is extremely helpful) – though this was down slightly from 7.5 pts in the 2022 survey.

By region, help received scored highest in capital cities

(unchanged at 7.5 pts), followed by rural areas (7.1 pts, down from 7.8 pts in 2022) and regional cities (7.0 pts, also down from 7.5 pts). Men said it was more helpful (7.5 pts vs. 7.3 pts in 2022), but women said it was somewhat less helpful (7.1 pts, down from 7.8 pts). People in the 35-44 (7.8 pts vs. 7.5 pts), 25-34 (unchanged at 7.7 pts), 55-64 (7.5 pts vs. 7.1 pts) and over-65 (7.3 pts vs. 7.2 pts) age groups found it most helpful, and those in the 18-24 (6.8 pts, down from 7.6 pts) and 45-54 (6.9 pts, down from 7.8 pts) much less helpful in 2023. People in the higher income group also said it was less helpful (7.4 pts, down from 7.8 pts), but perceptions in the lower income group were unchanged (7.1 pts) – see chart at left.

Not only was help scored quite high in 2023, over 1 in 2 (51%) Australians said it was 'very' helpful in assisting them to manage their mental health (i.e., scored 8+ pts) – though this was also down slightly from 53% in 2022.

By region, the number who found it very helpful increased to 57% in capital cities (53% in 2022), but fell noticeably in rural areas (46% vs. 55% in 2022) and regional cities

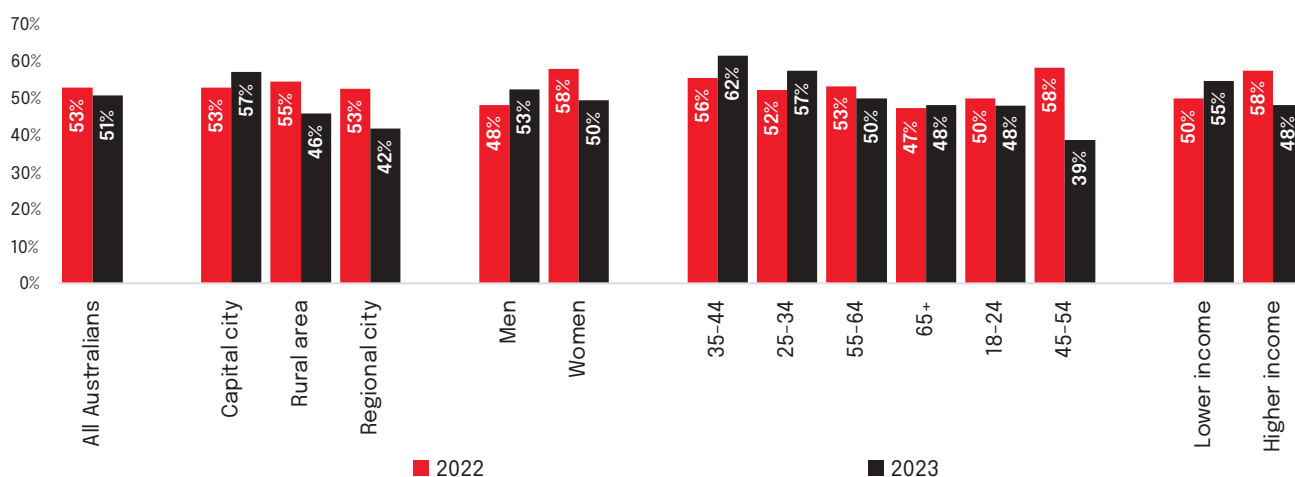
(42% vs. 53% in 2022). More men found it very helpful (53% vs. 48% in 2022), but fewer women did (50%

**Australians scored the professional mental health help they received 'quite' helpful at a solid 7.3 pts out of 10.**

vs. 58%). By age, the number who found in very helpful increased and was highest in the 35-44 (62% vs. 56% in 2022) and 25-34 (57% vs. 52%) age groups, but was largely steady in most other groups.

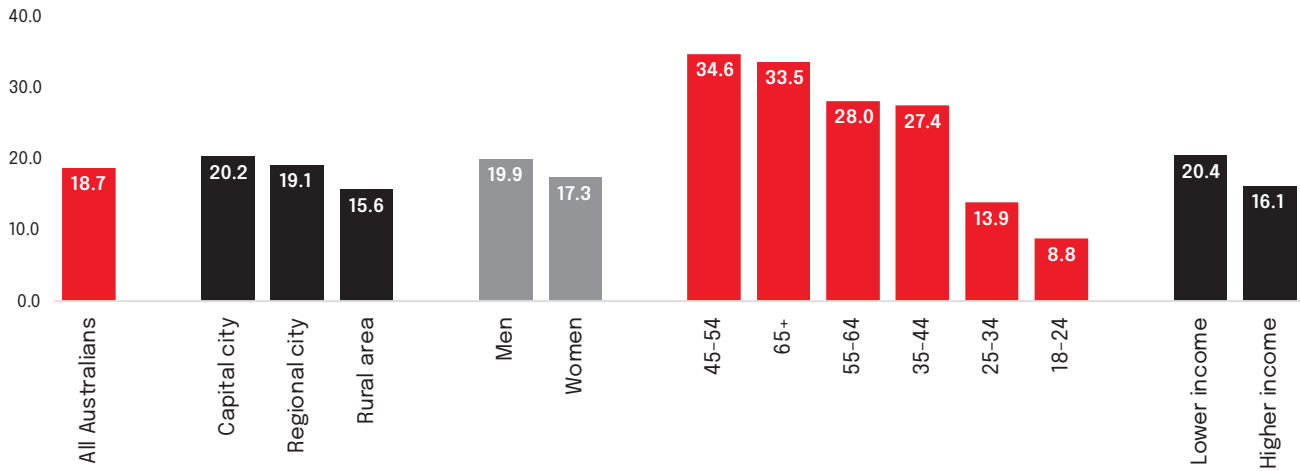
The 45-54 age group was the outlier, with the number who said it was very helpful falling sharply to just 39% (58% in 2022). The number of people in the lower income group who said it was very helpful increased in 2023 (55% vs. 50% in 2022), but fell noticeably in the higher income group (48% vs. 58%) – see chart below.

**Figure 8: How helpful was help you received in assisting you to manage your emotions, stress or mental health? (% scored 'high')**





**Figure 9: How long have you been waiting to access the support/care you need? (average weeks)**



Australians who felt they needed help and not yet got it but had reached out and were waiting to be seen were asked how long they had been waiting to access the support or care they need. On average, they have been waiting a long time – 18.7 weeks or over four months.

Wait times were typically longer in capital (20.2 weeks) and regional (19.1 weeks) cities than rural areas (15.6 weeks). Men were waiting longer than women (19.9 weeks for men vs. 17.3 weeks for women). Average wait times were also much longer in the 45-54 (34.6 weeks) and over-65 (33.5 weeks) age groups, particularly when compared to the 18-24 (8.8 weeks) and 25-34 (13.9 weeks) age groups. Australians in the lower income group were also enduring somewhat longer wait times than those in the higher income groups (20.4 weeks for lower income vs. 16.1 weeks for higher income).



When Australians were asked why they had not sought any help, the most common reason given by over 1 in 2 (54%) was they felt they could manage on their own. Cost was also a key consideration for just over 1 in 3 (34%) people. Around 1 in 5 (21%) simply didn't know what to do or who to see, while almost 1 in 10 were unable to help themselves or couldn't find anyone to help them (8% and 7% respectively).

Being able to manage alone was the main reason for not seeking help in most groups, though by somewhat more in regional cities than rural areas (58% regional cities vs. 45% rural areas), men than women (59% men vs. 49% women), and in the 45-54 age group (59%) than in the 25-34 and 55-64 age groups (50%). Most people in the higher income group also said the main reason was they could

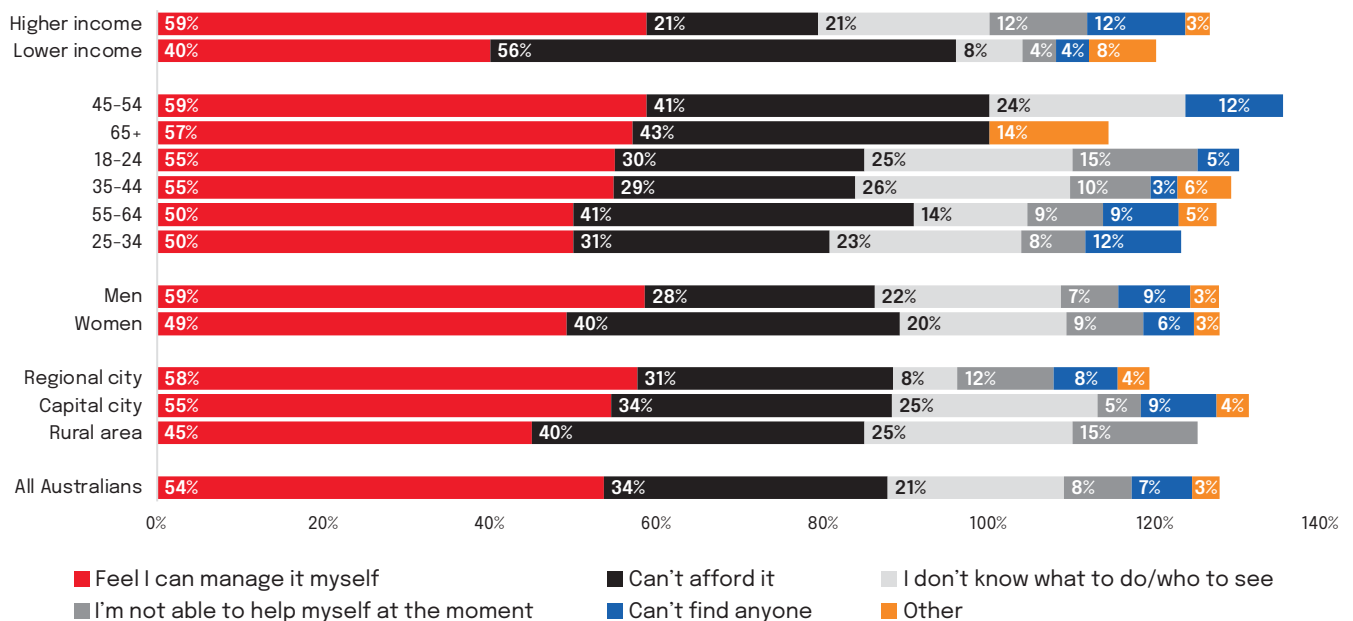
manage themselves (59%), but in the lower income group cost was the main reason for not seeking help (56%). Cost was also a much bigger issue in rural areas (40%) than other regions, and for women than men (40% women vs. 28% men), but much less an issue in age groups between 18 to 44 than in older age groups.

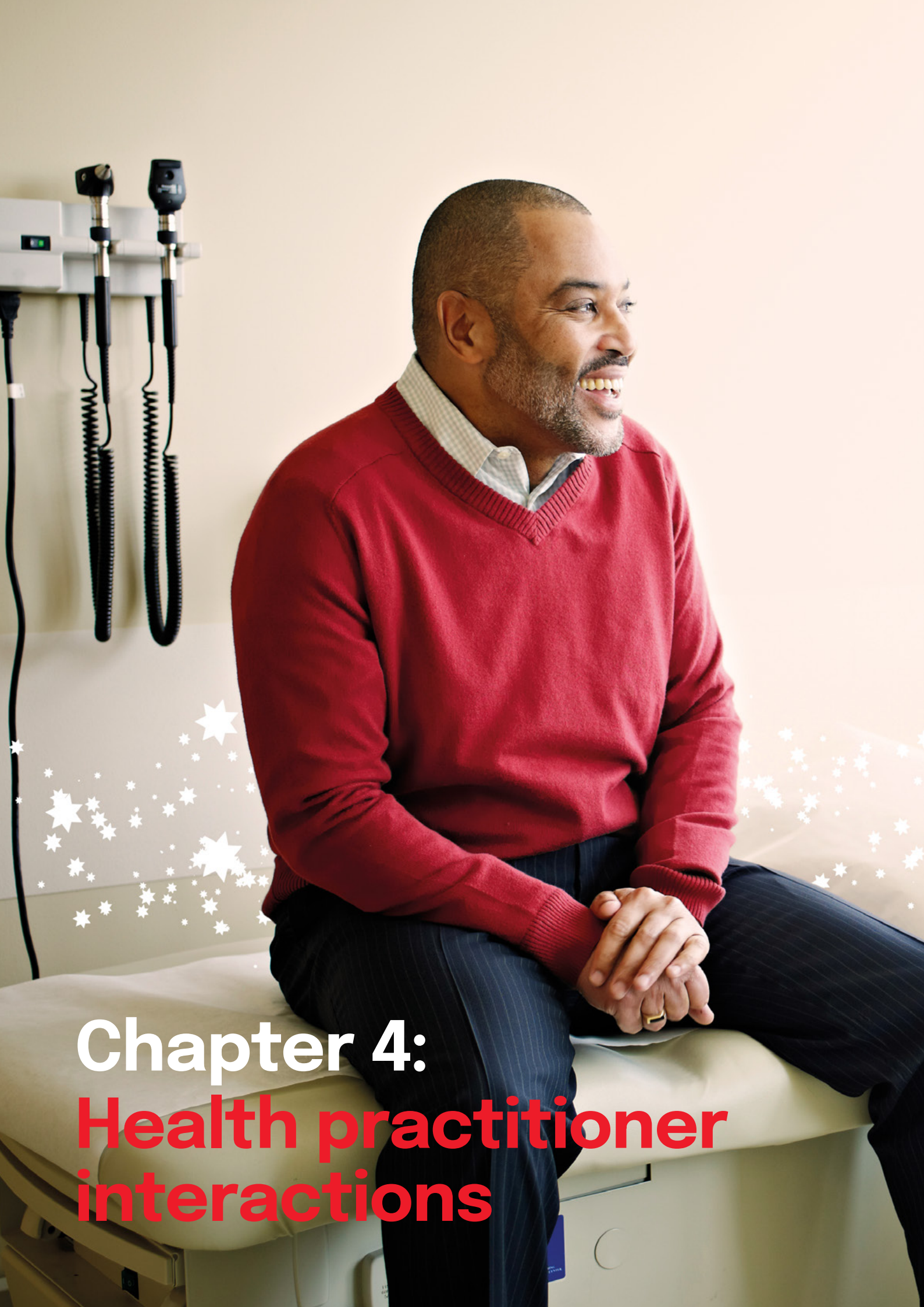
In other findings, far fewer people in regional cities (8%) said they didn't know what to do or who to see than in capital cities and rural areas (25%), as did those in the over-65 (0%) and 55-64 (14%) age groups relative to other groups. But more than twice as many in the higher income group didn't know what to do or who to see than in the lower income group (21% higher income vs. 8% lower income). Noticeably more people in rural areas (15%) and regional cities (12%) also indicated they

**The most common reason given by Australians for not seeking help with mental health was they felt they could manage on their own.**

were unable to help themselves at the moment than in capital cities (5%), as did Australians in the 18-24 age group (15%) compared to other age groups, and in the higher income group relative to the lower income group (12% higher income vs. 4% lower income).

**Figure 10: Why have you not sought any help?**





# Chapter 4: Health practitioner interactions

**The 2023 NAB Health Insights survey found that, over the past year, GPs, pharmacies and dentists were again the most commonly visited health practitioners.**

Visitation was highest for GPs, with just over 7 in 10 (73%) Australians visiting one in the past 12 months – though this was down from almost 8 in 10 (78%) in 2022. A similar trend was observed for pharmacies, with the number who used one also dipping to just over 6 in 10 (61%) in the past 12 months, from 7 in 10 (70%) in the 2022 survey. Slightly more people, however, visited a

dentist (50%, up from 47% in the 2022 survey).

The 2023 survey also revealed a sizeable increase in the overall number of Australians who visited an optometrist in the past 12 months (35%, up from 28% in 2022), as well as a smaller increase in the number who visited a specialist doctor (28%, up from 24% in 2022). We did, however, also note a small decline in the number who used a public hospital (22%, down from 25% in 2022).

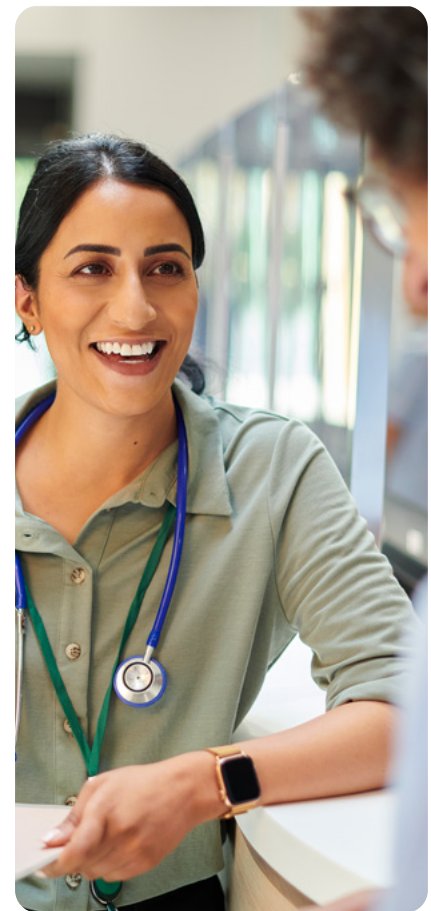
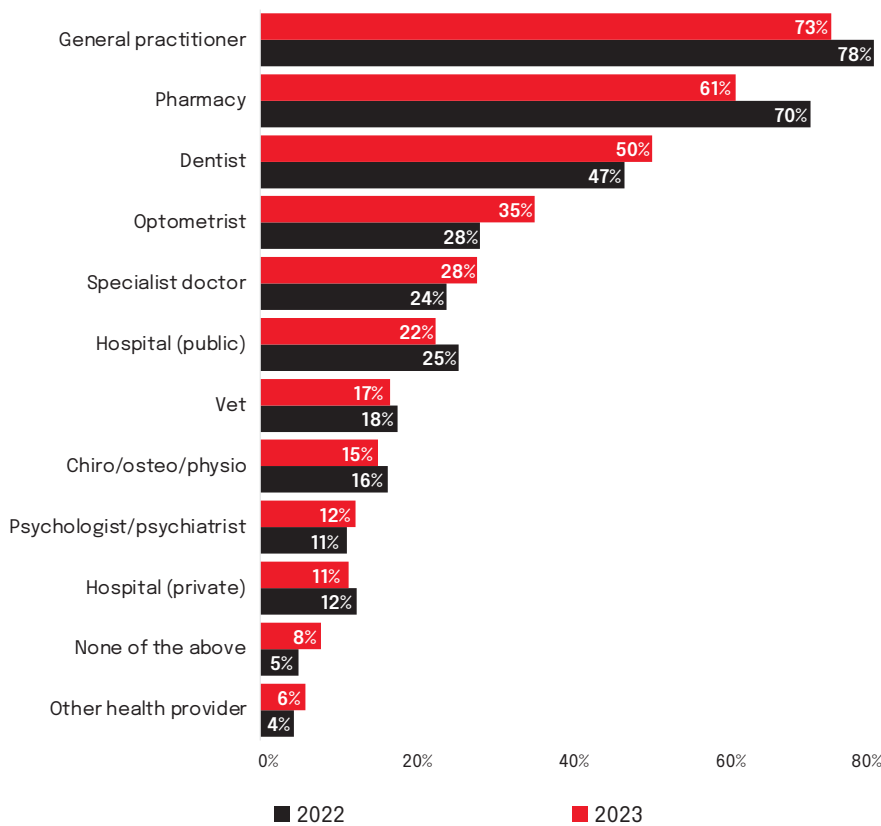
Visitation for all other health practitioners was basically unchanged over the past 12 months – vets (17%),

chiropractors, osteopaths & physiotherapists (15%), psychologists & psychiatrists (12%), private hospitals (11%) and other health providers (6%).

Almost twice as many Australians signalled they did not visit any of these practitioners (8%) than in the 2022 survey (5%).

**Just over 7 in 10 Australians visited a GP in the past 12 months.**

**Figure 11: Have you used or visited any of these health practitioners in the past year?**

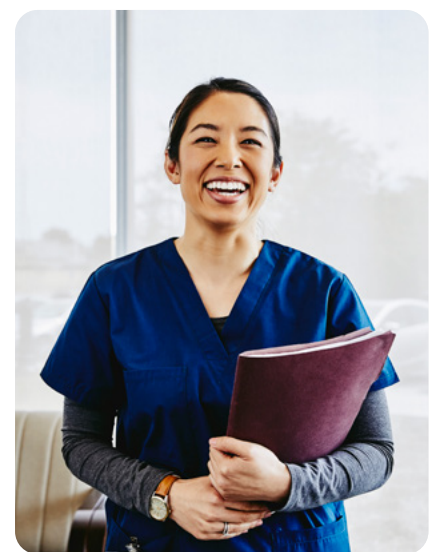


**Figure 12: Visited these health practitioners in the past 12 months: region, gender, age & income**

	All Australians	Capital city	Regional city	Rural area	Men	Women	18-24	25-34	35-44	45-54	55-64	65+	Lower income	Higher income
General practitioner	<b>73%</b>	75%	69%	67%	<b>68%</b>	77%	<b>36%</b>	<b>60%</b>	68%	81%	86%	92%	69%	71%
Pharmacy	<b>61%</b>	61%	59%	63%	<b>54%</b>	67%	<b>41%</b>	<b>49%</b>	<b>48%</b>	58%	73%	86%	61%	55%
Dentist	<b>50%</b>	53%	46%	<b>41%</b>	48%	52%	41%	<b>37%</b>	45%	48%	61%	63%	<b>40%</b>	55%
Optometrist	<b>35%</b>	37%	34%	28%	32%	38%	<b>12%</b>	<b>19%</b>	<b>22%</b>	35%	51%	61%	31%	37%
Specialist doctor	<b>28%</b>	27%	26%	31%	25%	30%	<b>15%</b>	<b>16%</b>	<b>19%</b>	21%	45%	45%	22%	28%
Hospital (public)	<b>22%</b>	<b>18%</b>	26%	35%	18%	26%	32%	24%	<b>15%</b>	20%	21%	25%	33%	<b>18%</b>
Vet	<b>17%</b>	16%	15%	19%	13%	20%	15%	17%	15%	19%	16%	15%	16%	15%
Chiro/osteo/physio	<b>15%</b>	16%	10%	16%	<b>10%</b>	20%	8%	13%	18%	13%	16%	19%	10%	16%
Psychologist/psychiatrist	<b>12%</b>	10%	16%	14%	10%	15%	22%	18%	11%	14%	7%	<b>5%</b>	13%	11%
Hospital (private)	<b>11%</b>	11%	12%	8%	11%	12%	14%	10%	10%	<b>6%</b>	10%	17%	8%	12%
Other health provider	<b>6%</b>	5%	9%	5%	4%	8%	2%	3%	3%	4%	7%	13%	8%	5%
None of the above	<b>8%</b>	8%	8%	8%	10%	<b>5%</b>	11%	11%	13%	8%	5%	<b>1%</b>	9%	7%

By region, we noted a somewhat higher number in capital cities who visited a GP (75%) and dentist (53%) in 2023, and a much higher number in rural areas who visited a public hospital (35%). Rural area visits to a dentist (41%) and public hospital in capital cities (18%) were somewhat lower in 2023. More women visited all health practitioners than men, particularly when it came to pharmacies (67% women vs. 54% men), chiropractors, osteopaths & physiotherapists (20% vs. 10%) and GPs (77% vs. 68%), whereas twice as many men did not visit any of

these practitioners (10% vs. 5%). More older Australians typically visited all health practitioners over the past 12 months than did younger people, except when it came to public hospitals and psychologists & psychiatrists (18-24 age group). By income, key differences were the much larger number in the higher income group who visited a dentist (55% higher income vs. 40% lower income), and in the lower income group who visited a public hospital (33% lower income vs. 18% higher income).



Satisfaction with the quality of care, advice or treatment received from health practitioners over the past 12 months remains very high for most practitioners. That said, it did moderate relative to 2022 for all practitioners.

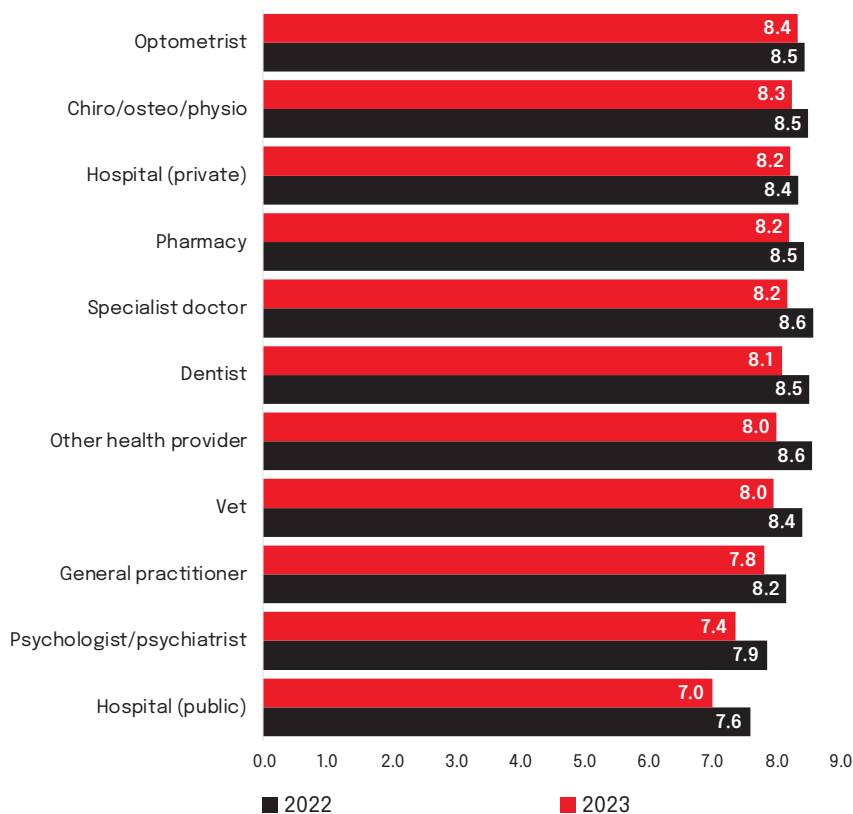
In the 2023 survey, Australians who had visited health practitioners rated their satisfaction with the quality of care, advice or treatment highest for optometrists (8.4 pts vs. 8.5 pts in 2022), followed by chiropractors, osteopaths & physiotherapists (8.3 pts vs. 8.5 pts), private hospitals (8.2 pts vs. 8.4 pts), pharmacy (8.2 pts vs. 8.5 pts), specialist doctors (8.2 pts vs. 8.6 pts), dentists (8.1 pts vs. 8.5 pts), other health providers (8.0 pts vs. 8.6 pts) and vets (8.0 pts vs. 8.4 pts).

It was lowest, and was scaled back somewhat, for public hospitals (7.0 pts vs. 7.6 pts in 2022), psychologists & psychiatrists (7.4 pts vs. 7.9 pts), and GPs (7.8 pts vs. 8.2 pts).

Australians in most regions rated very high levels of satisfaction for all practitioners in all areas except for some exceptions in rural areas – public hospitals (6.3 pts), psychologists & psychiatrists (6.4 pts) and other health providers (7.0 pts). We also noted lower satisfaction in regional cities for chiropractors, osteopaths & physiotherapists (7.5 pts) and private hospitals (7.8 pts) relative to capital cities and rural areas – see table page 32.



**Figure 13: Satisfaction with the quality of care/advice/treatment you received**



**Figure 14: Satisfaction with health practitioners in past 12 months: region, gender, age & income**

	All Australians	Capital city	Regional city	Rural area	Men	Women	18-24	25-34	35-44	45-54	55-64	65+	Lower income	Higher income
Optometrist	<b>8.4</b>	8.5	8.3	7.9	8.2	8.4	<b>7.1</b>	8.2	7.7	8.2	8.4	8.8	8.5	8.4
Chiro/osteo/physio	<b>8.3</b>	8.3	<b>7.5</b>	8.6	<b>8.0</b>	8.4	8.4	<b>7.7</b>	7.8	8.4	8.6	8.7	8.3	8.5
Hospital (private)	<b>8.2</b>	8.3	<b>7.8</b>	8.5	8.3	8.2	<b>6.9</b>	8.3	7.9	8.5	9.0	8.5	<b>7.9</b>	8.3
Pharmacy	<b>8.2</b>	8.3	8.1	7.9	8.1	8.3	<b>7.2</b>	7.6	7.8	8.3	8.3	8.9	8.3	8.2
Specialist doctor	<b>8.2</b>	8.3	8.0	7.9	8.2	8.2	<b>7.7</b>	7.9	7.8	8.1	8.3	8.5	8.1	8.4
Dentist	<b>8.1</b>	8.2	8.0	7.8	8.1	8.1	<b>7.4</b>	7.7	7.9	8.2	8.3	8.5	8.0	8.1
Other health provider	<b>8.0</b>	8.6	7.5	<b>7.0</b>	8.2	7.9	<b>3.0</b>	5.8	6.8	8.6	8.3	9.0	<b>8.1</b>	8.5
Vet	<b>8.0</b>	8.1	7.8	7.8	8.0	7.9	<b>7.5</b>	8.1	7.6	7.9	8.1	8.4	8.3	8.1
General practitioner	<b>7.8</b>	7.9	7.8	7.5	7.9	7.8	<b>6.6</b>	7.6	7.5	7.8	7.9	8.5	7.8	8.0
Psychologist/psychiatrist	<b>7.4</b>	7.5	7.8	<b>6.4</b>	7.6	<b>7.2</b>	<b>6.9</b>	7.5	7.7	7.7	7.0	7.3	<b>7.0</b>	7.5
Hospital (public)	<b>7.0</b>	7.4	6.8	<b>6.3</b>	7.3	<b>6.8</b>	<b>6.0</b>	6.8	6.7	7.1	7.3	7.9	7.0	7.3

Some key differences between men and women included somewhat higher satisfaction among women for chiropractors, osteopaths & physiotherapists (8.4 pts women vs. 8.0 pts men), and for men public hospitals (7.3 pts men vs. 6.8 pts women) and psychologists & psychiatrists (7.6 pts vs. 7.2 pts).

By age, satisfaction was highest for Australians over 65 for most health providers, except private hospitals where it was highest in the 55-64 age group, and psychologists & psychiatrists

where it was equal highest in the 35-44 and 45-54 age groups. Satisfaction was lowest for all healthcare providers in the 18-24 age group (and particularly for other health providers), apart from chiropractors, osteopaths & physiotherapists where satisfaction was lowest in the 25-34 age group.

Satisfaction was rated broadly the same for most health providers by people in lower and higher income groups. The gap was widest for psychologists & psychiatrists (7.5 pts higher income vs. 7.0 pts lower

income), other health providers (8.5 pts vs. 8.1 pts) and private hospitals (8.3 pts vs. 7.9 pts).

Australians agree it is still 'very' easy to see or use pharmacies (8.8 pts vs. 8.9 pts in the 2022 survey), optometrists (unchanged at 8.5 pts), vets (unchanged at 8.2 pts) and chiropractors, osteopaths & physiotherapists (8.2 pts, down slightly from 8.4 pts in 2022).

Getting to see or use a dentist (7.7 pts vs. 7.9 pts), other health provider (7.7 pts vs. 8.3 pts), private

hospital (7.7 pts vs. 8.0 pts) or GP (unchanged at 7.3 pts) was also considered 'quite' easy though a little harder than in 2022 for all these providers except GPs.

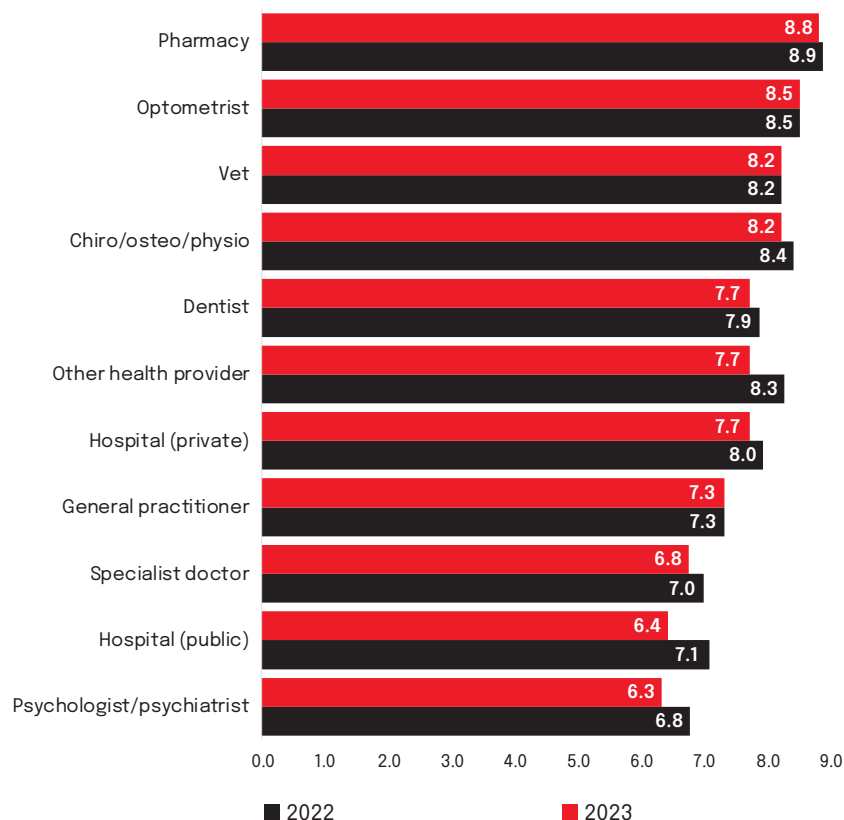
Australians reported it was 'moderately' easy to see or use specialist doctors (6.8 pts vs. 7.0 pts), public hospitals (6.4 pts vs. 7.1 pts) or psychologists & psychiatrists (6.3 pts vs. 6.8 pts), with the ease of using public hospitals and psychologists & psychiatrists noticeably lower than reported in the 2022 survey.

Australians living in regional cities found it somewhat more difficult to see a vet (7.7 pts),

other health provider (6.9 pts) or specialist doctor than people in other regions in 2023, and in rural areas public hospitals (6.1 pts). Australians in regional cities and rural areas also found it somewhat harder to see dentists (7.3 pts) or psychologists & psychiatrists (6.1 pts) than in capital cities (6.5 pts).

Women and men were in broad agreement for most practitioners, with the widest gap for GPs (7.5 pts men vs. 7.1 pts women) and psychologists & psychiatrists (6.6 pts vs. 6.2 pts).

**Figure 15: How easy was it to get to see/use each of these health practitioners?**





**Figure 16: Ease of seeing or using health practitioners in past 12 months: region, gender, age & income**

	All Australians	Capital city	Regional city	Rural area	Men	Women	18-24	25-34	35-44	45-54	55-64	65+	Lower income	Higher income
Pharmacy	<b>8.8</b>	9.0	8.7	8.4	8.8	8.9	<b>7.8</b>	8.3	8.7	8.7	9.2	9.2	8.7	8.9
Optometrist	<b>8.5</b>	8.6	8.1	8.5	8.3	8.6	<b>7.9</b>	<b>7.9</b>	8.3	8.1	8.7	8.7	8.1	8.5
Vet	<b>8.2</b>	8.3	<b>7.7</b>	8.3	8.2	8.2	<b>7.5</b>	8.2	8.0	8.2	7.9	9.1	8.3	8.0
Chiro/osteo/physio	<b>8.2</b>	8.4	7.8	7.7	8.0	8.2	8.0	<b>7.4</b>	7.8	8.0	8.8	8.8	<b>7.3</b>	8.4
Dentist	<b>7.7</b>	7.9	<b>7.3</b>	<b>7.3</b>	7.6	7.8	<b>7.1</b>	7.3	7.8	7.6	7.6	8.3	7.5	7.8
Other health provider	<b>7.7</b>	8.1	<b>6.9</b>	8.0	7.6	7.7	8.3	6.8	<b>6.2</b>	7.9	7.3	8.2	8.0	7.9
Hospital (private)	<b>7.7</b>	7.9	7.2	7.5	7.8	7.5	<b>5.9</b>	7.8	7.1	8.0	8.2	8.4	7.8	7.6
General practitioner	<b>7.3</b>	7.4	7.1	7.1	7.5	<b>7.1</b>	<b>6.7</b>	7.1	7.1	6.9	7.4	8.0	7.4	7.3
Specialist doctor	<b>6.8</b>	6.9	<b>6.4</b>	6.8	6.7	6.8	7.1	6.6	6.8	<b>5.6</b>	6.9	7.1	<b>6.4</b>	7.3
Hospital (public)	<b>6.4</b>	6.5	6.6	<b>6.1</b>	6.6	6.3	6.2	6.7	<b>5.5</b>	6.1	6.4	7.2	6.2	6.4
Psychologist/psychiatrist	<b>6.3</b>	6.5	<b>6.1</b>	<b>6.1</b>	<b>6.6</b>	<b>6.2</b>	<b>5.9</b>	6.3	6.8	6.3	6.4	6.7	<b>5.3</b>	6.4





By age group, the ease of seeing or using healthcare practitioners was equal highest in the 55-64 and over-65 age groups for pharmacy (9.2 pts), optometrists (8.7 pts) and chiropractors, osteopaths & physiotherapists (8.8 pts), and equal highest in the 18-24 and over-65 age groups for specialist doctors (7.1 pts). The ease of seeing or using health practitioners over the past year was highest in the over-65 age group for all other

providers, except psychologists & psychiatrists (highest in the 35-44 age group) and other health providers (highest in the 18-24 age group).

Australians in the 18-24 age group reported that it was noticeably harder to use private hospitals (5.9 pts) and psychologists and psychiatrists (5.9 pts) than did any other age group, people in the 35-44 age group other health providers (6.2 pts)

and public hospitals (5.5 pts), and in the 45-54 age group specialist doctors (5.6 pts).

Experiences broadly aligned for all providers for Australians in the higher and lower income groups, with a few exceptions – chiropractors, osteopaths & physiotherapists (8.4 pts higher income vs. 7.3 pts lower income), specialist doctors (7.3 pts vs. 6.4 pts) and psychologists & psychiatrists (6.4 pts vs. 5.3 pts).



**Chapter 5:**  
**The healthcare**  
**consumer**

## Healthcare affordability

Cost of living pressures are adding to a collective sense of financial stress. The latest NAB Australian Wellbeing report shows that stresses associated with living costs are now at a four-and-a-half-year high. Financial stresses are key contributors to our mental wellbeing. The ability to finance retirement has typically been the biggest cause of financial stress, along with providing for the family's future and being unable to meet the cost of medical bills and healthcare.

When Australians who had visited or used a health practitioner in the past year were asked how

affordable the care, advice or treatment they received was in 2023, it ranged significantly across providers. Also apparent was the fact Australians reported a deterioration in affordability for most providers relative to 2022.

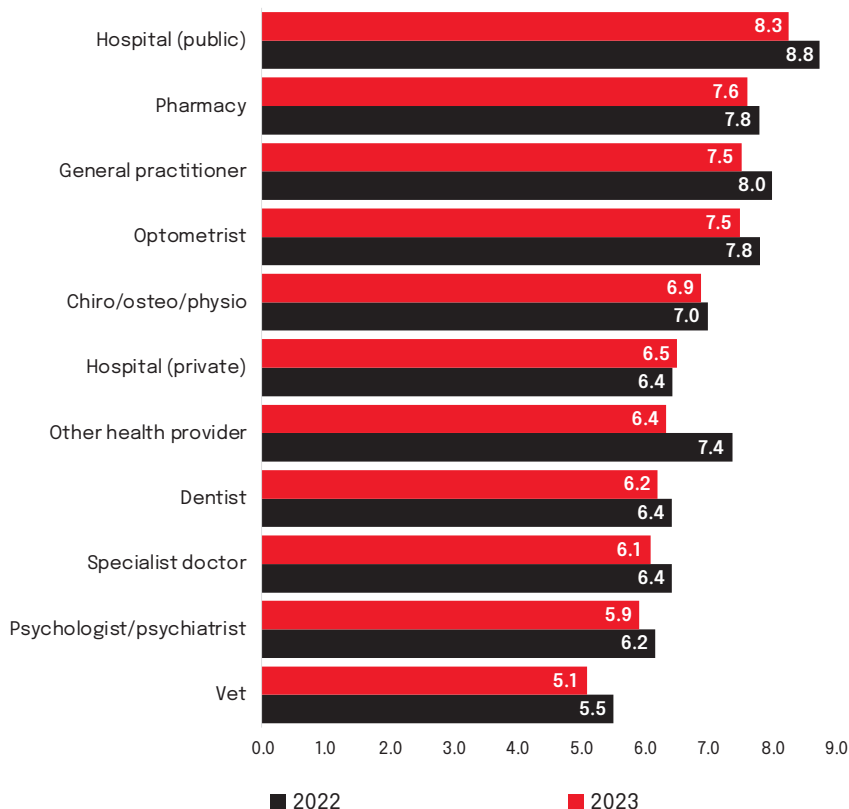
In 2023, affordability again rated highest for public hospitals at 8.3 pts (though down somewhat from 8.8 pts in 2022). The next most affordable providers were pharmacies (7.6 pts vs. 7.8 pts), GPs (7.5 pts vs. 8.0 pts) and optometrists (7.5 pts vs. 7.8 pts).

Affordability was largely unchanged for chiropractors, osteopaths & physiotherapists (6.9 pts vs. 7.0 pts) and private hospitals (6.5 pts vs. 6.4 pts). It

**Stresses associated with living costs are now at a four-and-a-half-year high.**

deteriorated significantly for other health providers (6.4 pts vs. 7.4 pts). The least affordable providers in 2023 were vets (5.1 pts vs. 5.5 pts), psychologists & psychiatrists (5.9 pts vs. 6.2 pts), specialist doctors (6.1 pts vs. 6.4 pts) and dentists (6.2 pts vs. 6.4 pts), with affordability for these providers worse than in 2022.

**Figure 17: How affordable was the care/advice/treatment you received?**



**Figure 18: Affordability of health practitioners in the past 12 months: region, gender, age & income**

	All Australians	Capital city	Regional city	Rural area	Men	Women	18-24	25-34	35-44	45-54	55-64	65+	Lower income	Higher income
Hospital (public)	<b>8.3</b>	8.5	8.5	<b>7.6</b>	8.3	8.2	<b>6.8</b>	7.9	7.9	8.7	9.0	9.1	<b>7.9</b>	8.6
Pharmacy	<b>7.6</b>	7.7	7.3	7.6	7.7	7.6	<b>6.8</b>	7.3	7.4	7.2	7.8	8.3	7.6	7.7
General practitioner	<b>7.5</b>	7.6	7.3	7.5	7.6	7.5	<b>6.5</b>	7.2	7.2	7.1	7.8	8.3	8.0	<b>7.4</b>
Optometrist	<b>7.5</b>	7.5	7.4	7.6	7.7	7.4	<b>6.2</b>	6.9	7.0	7.0	7.7	8.1	7.5	7.5
Chiro/osteo/physio	<b>6.9</b>	6.8	7.0	7.0	7.3	6.7	<b>6.0</b>	6.4	6.4	6.6	7.3	7.8	7.0	6.7
Hospital (private)	<b>6.5</b>	6.4	7.0	6.3	7.1	6.0	6.3	7.4	6.1	<b>5.0</b>	5.9	7.1	7.2	<b>6.2</b>
Other health provider	<b>6.4</b>	6.7	<b>5.8</b>	6.1	6.9	5.9	<b>5.3</b>	5.7	5.4	6.0	5.4	7.3	6.9	<b>6.1</b>
Dentist	<b>6.2</b>	6.2	6.0	6.6	6.5	6.0	6.4	6.3	<b>5.6</b>	6.0	5.7	7.0	6.4	6.6
Specialist doctor	<b>6.1</b>	6.1	6.4	5.8	6.4	5.9	7.1	6.6	5.8	<b>4.9</b>	5.6	6.7	6.2	6.3
Psychologist/psychiatrist	<b>5.9</b>	6.0	6.2	<b>5.3</b>	6.4	5.7	<b>5.1</b>	6.3	6.2	5.6	6.2	6.8	<b>5.3</b>	5.9
Vet	<b>5.1</b>	5.2	5.5	<b>4.3</b>	6.2	4.5	5.5	5.3	<b>4.5</b>	<b>4.5</b>	4.8	6.2	5.5	5.9

By region, affordability was somewhat higher for public hospitals in capital and regional cities (8.5 pts) than rural areas (7.6 pts). People in regional cities also reported noticeably higher affordability for private hospitals (7.0 pts), and in capital cities other health providers (6.7 pts). People in regional cities also, however, reported somewhat lower affordability for other health providers (5.8 pts), and in rural areas vets (4.3 pts) and psychologists & psychiatrists (5.3 pts).

Affordability concerns weighed more heavily on women in 2023. Affordability was rated broadly the same by men and women for

public hospitals, pharmacies, GPs and optometrists, but men said it was noticeably better for chiropractors, osteopaths & physiotherapists (7.3 pts men vs. 6.7 pts women), private hospitals (7.1 pts vs. 6.0 pts), other health providers (6.9 pts vs. 5.9 pts), dentists (6.5 pts vs. 6.0 pts), specialist doctors (6.4 pts vs. 5.9 pts), psychologist & psychiatrists (6.4 pts vs. 5.7 pts) and vets (6.2 pts vs. 4.5 pts).

By age, affordability rated highest in the over-65 group for all providers apart from private hospitals (highest in the 25-34 group) and specialist doctors (highest in the 18-24 group). Affordability rated lowest in

the 18-24 age group for public hospitals, pharmacies, GPs, optometrists, chiropractors, osteopaths & physiotherapists, other health providers and psychologists & psychiatrists. The 35-44 and 45-54 group rated vets least affordable, the 35-44 age group dentists, and the 45-54 group private hospitals and specialist doctors.

Interestingly, people in the lower income group scored affordability somewhat better than in the higher income group for GPs (8.0 pts lower income vs. 7.4 pts higher income), private hospitals (7.2 pts vs. 6.2 pts) and other health providers (6.9 pts vs. 6.1 pts).

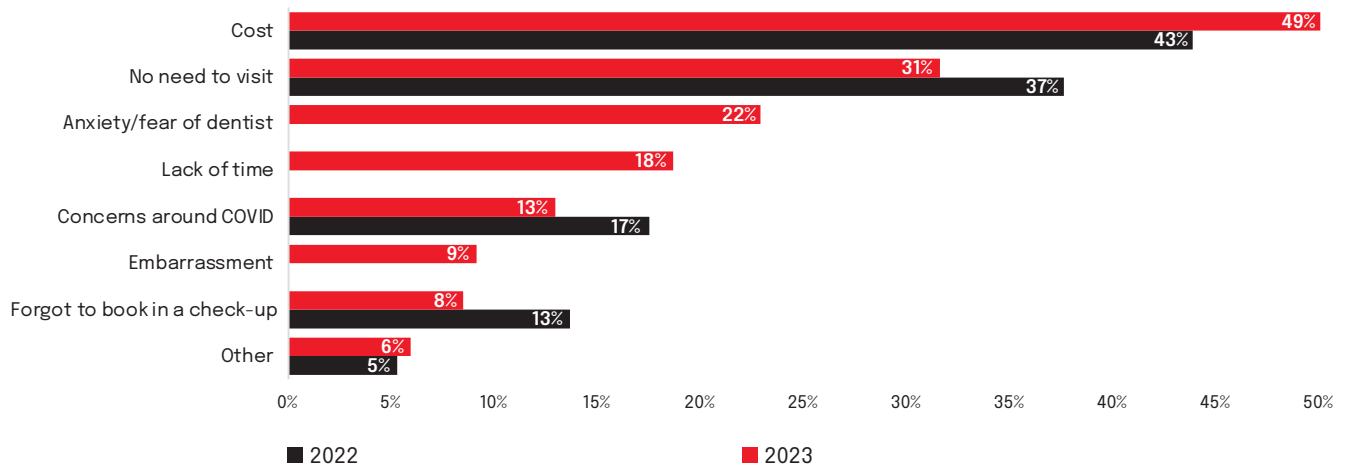
## Dental health

The Australian Dental Association (ADA) recommends all children and adults should have regular dental check-ups every six months, even if their teeth are in good shape. Having a dental check-up every six months can help prevent problems before

they become painful, costly or difficult to treat. NAB's survey has, however, again found that many Australians fall well short of ADA recommendations. Indeed, the 2023 survey found almost 1 in 2 (46%) Australians had not visited a dentist in over a year – up from 43% in 2022 survey.

**Many Australians continue to fall well short of Australian Dental Association recommendations for a six-monthly check-up.**

**Figure 19: Reasons for not visiting a dentist for more than a year**



**Figure 20: Reason for not visiting dentist in past 12 months: region, gender, age, income & private health cover**

	All Australians	Capital city	Regional city	Rural area	Men	Women	18-24	25-34	35-44	45-54	55-64	65+	Lower income	Higher income	Private health cover
Cost	49%	54%	38%	45%	48%	50%	24%	50%	61%	59%	48%	44%	46%	52%	38%
No need to visit	31%	28%	35%	33%	35%	26%	29%	26%	21%	26%	32%	52%	34%	23%	32%
Anxiety/fear of dentist	22%	19%	25%	27%	18%	26%	24%	21%	26%	19%	24%	21%	21%	19%	24%
Lack of time	18%	13%	24%	25%	16%	20%	26%	22%	18%	24%	13%	5%	13%	22%	23%
Concerns around COVID	13%	11%	18%	11%	10%	15%	18%	16%	7%	10%	16%	10%	13%	11%	14%
Embarrassment	9%	8%	11%	9%	9%	9%	7%	17%	11%	8%	6%	1%	4%	9%	7%
Forgot to book a check-up	8%	8%	10%	8%	8%	9%	16%	10%	10%	3%	10%	2%	5%	14%	12%
Other	6%	5%	3%	12%	3%	9%	1%	3%	4%	5%	13%	10%	10%	3%	3%

**Around 1 in 2 men and women said cost was the main reason for not visiting a dentist.**

Cost was the key reason for not visiting a dentist in all regions, though the number who did not visit because of cost was much higher in capital cities (54%) than regional cities (38%). More people in regional cities and rural areas did not visit because they had no need to, because of anxiety or fear of dentists, or because of lack of time than people in capital cities. Concerns around COVID were a reason for almost twice as many people in regional cities (18%), while noticeably more in rural areas had other reasons (12%).

Around 1 in 2 men (48%) and women (50%) said cost was the main reason for not visiting a dentist. Significantly more men also said they did not visit because they did not need to (35% men vs.

26% women), while noticeably more women did not because of anxiety or fear of dentists (26% women vs. 18% men), lack of time (20% vs. 16%) or concerns around COVID (15% vs. 10%).

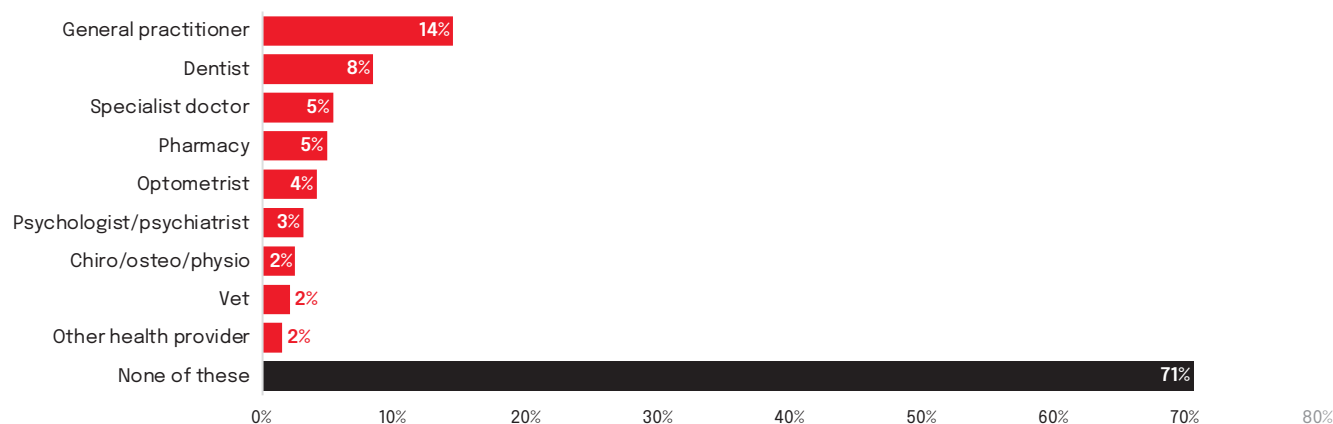
Cost was also the key reason in most age groups, except the 18-24 age group (lack of time) and over-65 age group (no need to), and was particularly significant in the 35-44 (61%) and 45-54 (59%) age groups. A much higher number in the over-65 age group said they did not need to (52%), while lack of time impacted noticeably more people in the 18-24 (26%), 45-54 (24%) and 25-34 (22%) age groups. Embarrassment was a much bigger issue in the 25-34 age group (17%), forgetting to book an appointment in the 18-24 group (16%) and other reasons in the 55-64 age group (13%). We also noted a much lower number in the over-65 age group did not visit because of lack of time (5%) and embarrassment (1%), in the 35-44 age group because of COVID concerns (7%), and in the over-65 (2%) and 45-54 age groups (3%) because they forgot to book a check-up.

Significantly more Australians in the higher income group did not visit a dentist because of cost (52% higher income vs. 46% lower income), lack of time (22% vs. 13%) or because they forgot to book a check-up (14% vs. 5%), but significantly more in the lower income group because there was no need to visit (34% lower income vs. 23% higher income). We also found a lot fewer people with private health cover were put off by cost than those with no cover (38% with private health cover vs. 56% without private health cover).

### Switching health professionals

Since COVID (i.e., in the past 2-3 years), the number of Australians who have switched health professionals because they were dissatisfied in some way was quite low – though it was more common for some health practitioners than others. The NAB 2023 survey found that around 1 in 7 (14%) Australians switched GPs for these reasons, and around 1 in 10 (8%) their dentist. Far fewer – around 1 in 20 – switched their specialist doctor or pharmacy (5%),

**Figure 21: Which health professionals have you switched since COVID (the past 2-3 years) because you were dissatisfied in some way?**



and even fewer their optometrist (4%), psychologist or psychiatrist (3%), chiropractor, osteopath or physiotherapist (2%), vet (2%) or other health provider (2%). Just over 7 in 10 (71%) Australians did not switch any of these health professionals because they were dissatisfied. There was little difference in switching behaviours by region, though slightly more in regional cities switched GPs (17%). Behaviours were also broadly the same by gender, except for switching GPs, with somewhat more women changing than men (17% women vs. 12% men).

Changing health providers since COVID has been much more common among younger people than older people for all health providers. While over 1 in 5 people

in the 18-24 (21%) and 25-34 (22%) age groups switched GPs, this fell to just 1 in 14 (7%) in the over-65 age group. For dentists, it ranged from 20% in the 18-24 group and 13% in the 25-34 and 35-44 age groups to 2-4% in all other age groups. A similar trend was evident with specialist doctors, with 15% in the 18-24 and 10% in the 25-34 age groups switching compared to 2-4% in all other groups. Noticeably more people in the 18-24 and 25-34 age groups also switched pharmacies (10%) and psychologists or psychiatrists (7%). But while approaching 9 in 10 (85%) Australians in the over-65 age group have not switched any of these health professionals since COVID, this fell to just 1 in 2 (50%) in the 18-24 age group.

**Just over 7 in 10 Australians did not switch any of their health professionals because of dissatisfaction.**

Behaviours were similar in higher and lower income groups, except for switching GPs where more people in the higher income group switched (16% higher income vs. 12% lower income).

**Figure 22: Switched health practitioners in past 12 months: region, gender, age & income**

	All Australians	Capital city	Regional city	Rural area	Men	Women	18-24	25-34	35-44	45-54	55-64	65+	Lower income	Higher income
General practitioner	14%	14%	17%	14%	12%	17%	21%	22%	17%	10%	12%	7%	12%	16%
Dentist	8%	8%	10%	7%	9%	8%	20%	13%	13%	4%	3%	2%	9%	10%
Specialist doctor	5%	5%	6%	8%	6%	5%	15%	10%	2%	3%	4%	3%	7%	5%
Pharmacy	5%	4%	5%	7%	5%	5%	10%	10%	4%	3%	4%	1%	6%	4%
Optometrist	4%	4%	4%	3%	4%	4%	3%	6%	4%	3%	3%	4%	5%	3%
Psychologist/psychiatrist	3%	3%	5%	3%	2%	4%	7%	7%	2%	2%	1%	0%	5%	2%
Chiro/osteo/physio	2%	2%	2%	3%	3%	2%	6%	4%	3%	1%	1%	1%	3%	3%
Vet	2%	2%	4%	1%	3%	2%	4%	5%	1%	3%	1%	0%	2%	2%
Other health provider	2%	1%	2%	1%	2%	1%	3%	1%	2%	1%	2%	1%	2%	1%
None of the above	71%	72%	66%	70%	73%	69%	50%	56%	68%	78%	79%	85%	71%	70%





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