

Key statistics and themes from the 2025 National Consumer Sentiment Survey Report

The 2025 National Consumer Sentiment Survey (NCSS) report helps improve our understanding of the healthcare system from consumers' perspectives, with a focus on primary care. The insights will help improve healthcare planning and delivery.

The 2025 NCSS findings revealed a healthcare landscape in which social determinants of health continue to influence consumer access, experience and outcomes. Notably, financial stress was the most consistent predictor across these dimensions.

Survey overview

- Conducted online between February and March 2025, surveying 5,160 Australians broadly representing the Australian community by age, gender and States and Territories.
- The findings showed a range of views and experiences regarding health and healthcare in 2025, including affordability, access, quality, and confidence in the healthcare system.
- Participants health status showed:
 - o 38.2% reported being in excellent or very good health in 2025, similar to 2024
 - o 61.7% reported living with at least one chronic condition
 - o The most common chronic conditions were mental health conditions (24.8%), arthritis (20.3%) and asthma (13.7%)

Summary of findings

- Overall satisfaction with healthcare quality was high (81.6%), especially among older and higher income earners, while 55.6% thought the system needed major changes, not a complete overhaul.
- Meanwhile, 34.4% believed only minor changes are needed, reflecting a segment of the population that are relatively satisfied with the healthcare system.
- The top 3 things consumers identified for improvements were, more doctors, nurses and other healthcare workers (66.7%), the cost of care and/or medicines (60.2%), and better access to care (43.1%), each showing slight increase from 2024, although these increases were not statistically significant.
- 57.1% felt that government spending on healthcare was too low with 24.7% reporting it was about the right amount; 3.4% said it was too high and 14.8% did not have an opinion.

Access

- In 2025, most respondents (95.8%) accessed at least one in-person healthcare service, which is similar to the rate reported in 2024 (95.3%).
- Cost (i.e., too expensive) was the main reason for not having insurance (71.9%).

- Navigating the system was difficult for many, especially people in rural areas and culturally and linguistically diverse (CALD) communities.
- Overall satisfaction with telehealth remained high among those who accessed a telephone and video consultation, with the majority (59.9%) of respondents considering its quality to be equivalent to in-person care

Affordability

- Financial stress was the most significant factor linked to poorer health outcomes, impacting people’s access, satisfaction, and confidence in the healthcare system.
- In 2025, about one in three people reported experiencing at least one financial difficulty or situation (35.6%) in the past 12 months, which is similar to the rate reported in 2024 (32.7%).
- Three in five people had private health insurance (60.9%), which is similar to the rate reported in 2024 (61.9%), with the “peace of mind” being the main reason for having health insurance.
- Most common reasons for not having private health insurance (38.2%) were: too expensive (71.9%), Medicare is good enough (36.1%) and out of pocket fees is too much (33.4%).

Health workforce

- The key concern was the shortage of healthcare workers; 66.7% of consumers want more doctors, nurses and other health professionals.
- 75.6% of respondents reported their healthcare providers often or always made sure they received the best care possible in 2025 compared to 72.9% in 2024.
- 72.9% reported their healthcare providers often or always included them in decisions about their health in 2025 compared to 69.6% in 2024.

Quality of care

- Overall satisfaction with healthcare quality was high (81.6%), especially among older and higher income earners
- Respectful care (86.5%) and cultural sensitivity (77.8%) during healthcare was often reported, while reports of discrimination fell to 6.6% in 2025 compared to 8.1% in 2024.

Type of care

- Of the consumers surveyed, 83.1% had seen a GP, 68.3% had visited their pharmacists, 48.2% had seen a dentist or oral health service, 31.9% had seen a specialist, 30.1% had been to a public hospital.
- 43.1% accessed telehealth services and of these, 86.5% were satisfied with telephone consultation and 81.5% were satisfied with video consultation.

- 31.7% of respondents reported needing to access after-hours care and of these, 57.8% went to the emergency department, and 20.0% accessed an urgent care clinic or priority primary care clinic.

Unmet medical needs

- Nearly 49.8% missed out on care they needed and for these consumers, cost was the main barrier, especially for dental care (67.0%), prescriptions (54.2%), and treatments (48.7%).
- One in four reported that they didn't see a doctor when needed in the past 12 months. The reasons they gave were: service not available when the consumer needed 37.3%, followed by consumers not being able to afford it 36.9%, being too busy 25.3%.
- One in two reported they hadn't accessed healthcare they needed at least once during the last 12 months, with cost being the main barrier. Navigating the system was challenging for people in rural areas and CALD communities.

Confidence in the healthcare system

- One in two (50.6%) were very or extremely confident they could get the care they needed if they became ill
- However, one in three (32.3%) felt confident in their ability to afford necessary care
- While the majority (61.8%) reported no change in their confidence in healthcare system, a notable 28.7% reported that their confidence declined

Digital health services

- Awareness of MyMedicare was limited, with only 32.8% reported having heard of it, and among those consumers, just over half (54.0%) had registered.
- More people were aware of My Health Record (MHR) compared to MyMedicare (70.2%) and most who registered for MHR found it useful, especially older people and those with chronic conditions
- CALD communities were less likely to know about these services.