

Health Literacy International Survey Results

July 2024

Click [here](#) for the full report of survey results.

Foreword

This report is an excerpt for medical professionals from the results of the "Health Literacy International Survey in the 100-Year Life Era x Digital Society," a survey on **"health literacy" (knowledge, motivation, and ability to obtain, understand, evaluate, and use health information)** in six countries: Japan, the United States of America, the United Kingdom, Australia, China, and Finland. (Click [here](#) for a collection of graphs of the full survey results, and [here](#) for the press release)

Please feel free to share this report within your hospital or to provide information to patients.

*If you quote or reprint this report, please add the following: "Source: Johnson & Johnson MedTech "Health Literacy International Survey".

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Survey Overview

Survey Objectives	The survey examined health and medical literacy in Japan, United States of America (USA), United Kingdom (UK), Australia, China, and Finland, and determined the extent to which people in Japan today have the "power" to correctly judge information, make appropriate choices and actions, and make good use of various resources, including digital technologies, in the areas of health and medical care.
Survey Method	Internet Research
Survey Area	Japan, United States of America (USA), United Kingdom (UK), Australia, China, Finland
Survey Target	Male and female aged 20~69, from each market.
Implementation schedule	Thursday, October 26 - Tuesday, November 7, 2023
Sample size allocation	<p>Japan, United States of America (USA), United Kingdom (UK), Australia, China, Finland: 500ss for each market. For each market, a total of 500 sample (ss) of residents of the top 2 cities were collected. * For Australia and Finland, the collection areas were expanded to the top 3 cities in order to collect the sufficient sample size.</p> <ul style="list-style-type: none">• Japan : Tokyo, Osaka• USA : New York, Los Angeles• UK : London, Manchester• Australia : Sydney, Melbourne, Brisbane• China : Shanghai, Beijing• Finland : Uusimaa, Pirkanmaa, Varsinais-Suomi <p>* For Japan, a national survey was additionally collected (Number collected : total 11,750ss (250ss for each prefecture, 25ss of each gender age group (20s-60s) were collected in each of the 47 prefectures) * For Tottori, Shimane, and Saga, the deficit number of the age group of 20-29 male was complemented by 30-39 male.</p>
No. of questions	Japan : Screeing questions : 3 questions; Main survey : 49 questions Other 5 Countries : Screening questions : 2 questions; Main survey : 47 questions

Notation in this report

Key terms in the report

In this report, the following terms in the text and graphs are used with the following meanings.

Terms	Descriptions
SA	A single answer question
MA	A multi-answer question
Health checkups	Health checkups, including complete medical checkups

Composition ratio (%) in the report

In this report, composition ratios (%) are rounded to the second decimal place. The total value may not add up to 100%.

Orders and Q numbers in the report

The numbers displayed at the beginning of questions on each page of this report indicate the question numbers in the questionnaire of "Health Literacy International Survey in the 100-Year Life Era x Digital Society," and differ from the order in which they appear in this report.

Information collection and decision making

Information collection and decision making

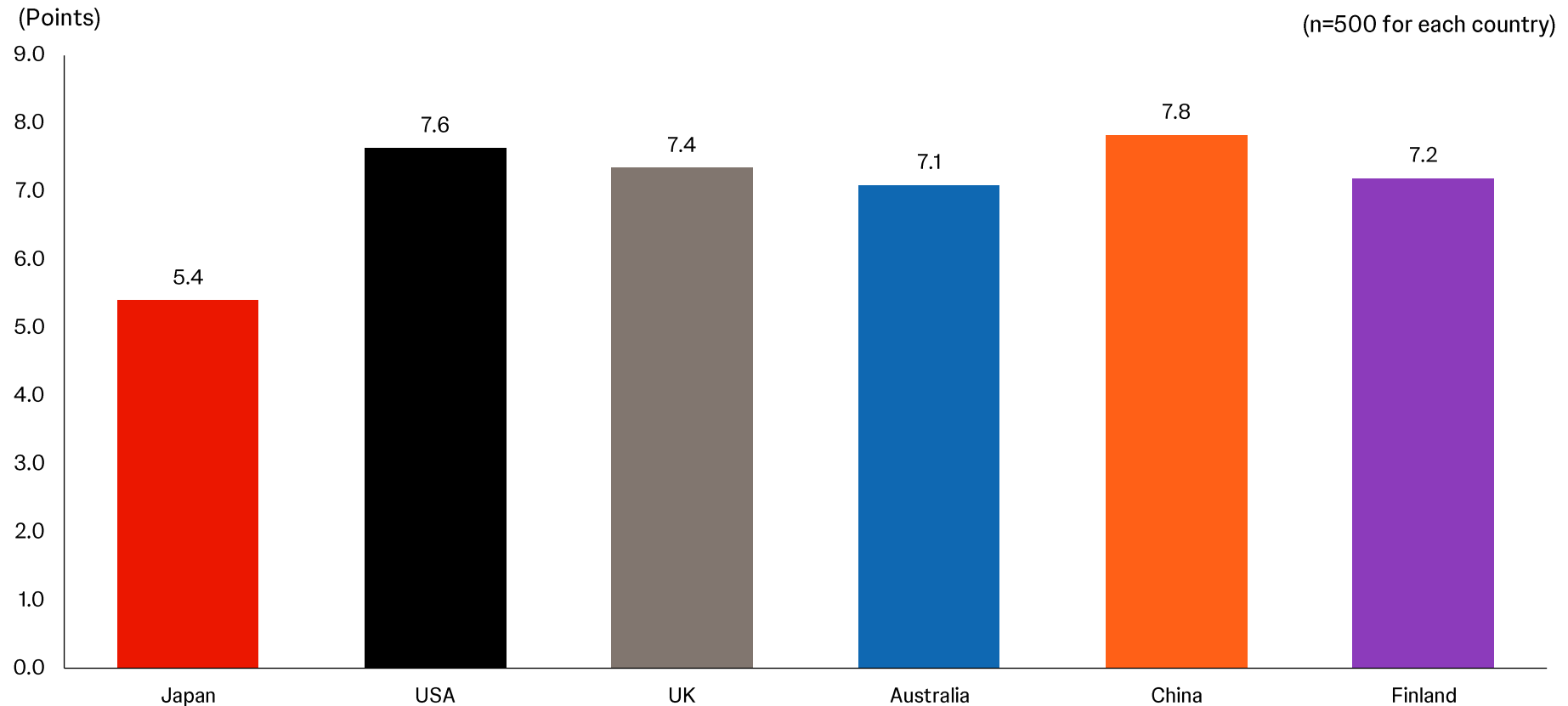
- Self-assessment of health literacy
- Collection of information on medical care
 - Collection of information on disease symptoms
 - Collection of information on methods of treatment of diseases
- Judgment of information on medical care
 - Judgment of information on disease symptoms
 - Judgment of information on methods of treatment of diseases
- Criteria for judging health and medical care information
- Challenges experienced regarding medical care information

Self-assessment of health literacy

Q1: On a 10 point scale, how would you rate your own health literacy (knowledge, motivation, and ability to obtain, understand, evaluate, and use health information)?
(SA Question target : All)

- In self-assessment of health literacy (knowledge, motivation, and ability to obtain, understand, evaluate, and use health information), **Japan scored an average of 5.4 out of 10, the lowest score among the six countries.**
- The average scores for the five countries other than Japan were in the sevens. The highest was China with 7.8. The United States had the highest percentage of people choosing 10 points.

Self-assessment of health literacy (average)



Self-assessment of health literacy

Q1: On a 10 point scale, how would you rate your own health literacy (knowledge, motivation, and ability to obtain, understand, evaluate, and use health information)?
(SA Question target : All)

- Looking at the distribution of health literacy self-assessment scores by country, Japan had **the highest number of people who answered "5 points" at 28.6%**.
- In China and the United States, where the average scores were high, **the percentage of people who answered "8 points" were highest** at 38.0% in China and 25.6% in the United States.

Self-assessment of health literacy

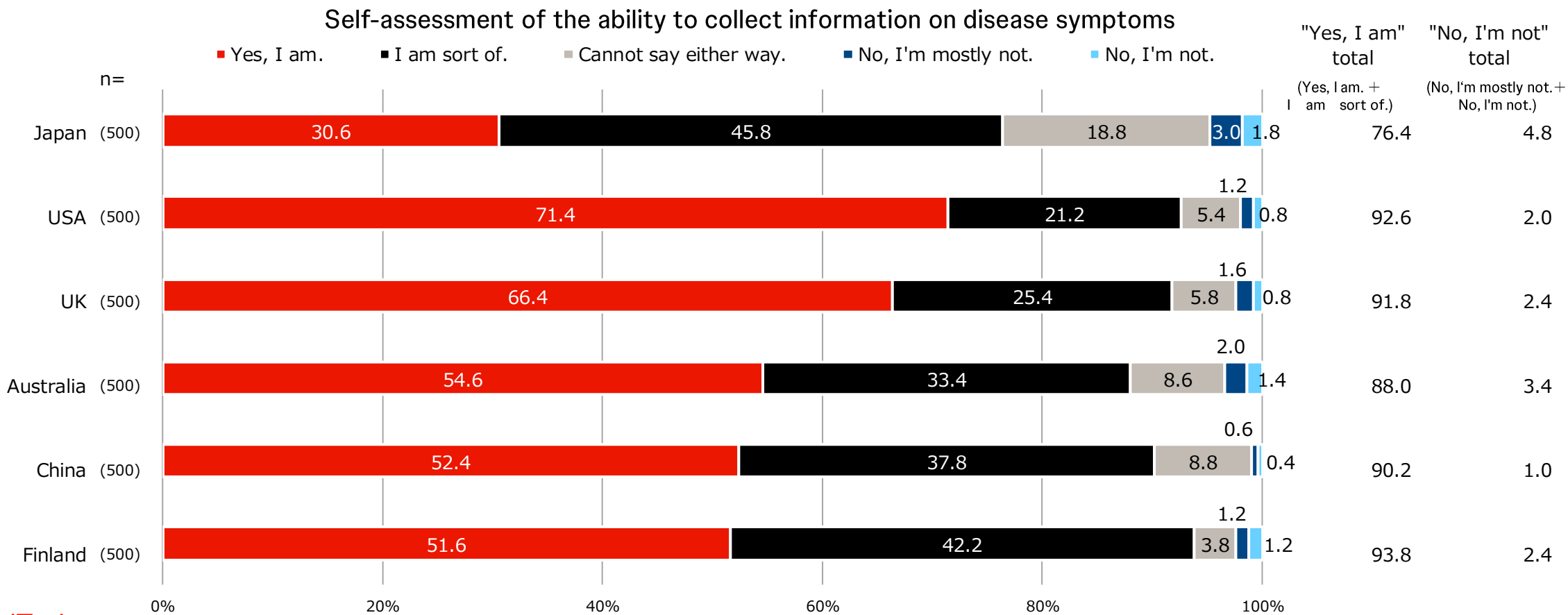
	(%)											
n=	0 points	1 point	2 points	3 points	4 points	5 points	6 points	7 points	8 points	9 points	10 points	point average
Japan (500)	2.8	1.4	4.8	9.2	8.6	28.6	15.0	12.2	10.4	4.2	2.8	5.40
USA (500)	1.6	0.2	0.2	1.6	2.8	7.6	8.4	16.4	25.6	16.8	18.8	7.64
UK (500)	0.8	0.6	1.0	2.6	2.2	8.4	9.4	21.0	26.0	17.6	10.4	7.35
Australia (500)	0.6	0.2	1.4	1.4	3.6	9.0	14.6	23.8	26.4	12.0	7.0	7.10
China (500)	0.2	0.0	0.2	0.4	0.8	3.8	7.6	18.6	38.0	24.6	5.8	7.83
Finland (500)	0.4	0.2	0.2	2.4	4.2	10.8	8.4	21.6	32.8	13.2	5.8	7.19

Collection of information on health and medical care, and its sources

Q5 : Are you able to find information on symptoms of diseases?
(SA Question target : All)

Collection of information on medical care

- Japan had the lowest percentage of people who answered that they “are able to collect information on symptoms of diseases” (total of “Yes, I am.” + “I am sort of.”) at 76.4%.
- In the five countries other than Japan, the percentage of people who answered that they “are able to collect information on symptoms of diseases” (total of “Yes, I am.” + “I am sort of.”) was around 90%, with Finland having the highest percentage (93.8%), followed by the United States (92.6%).

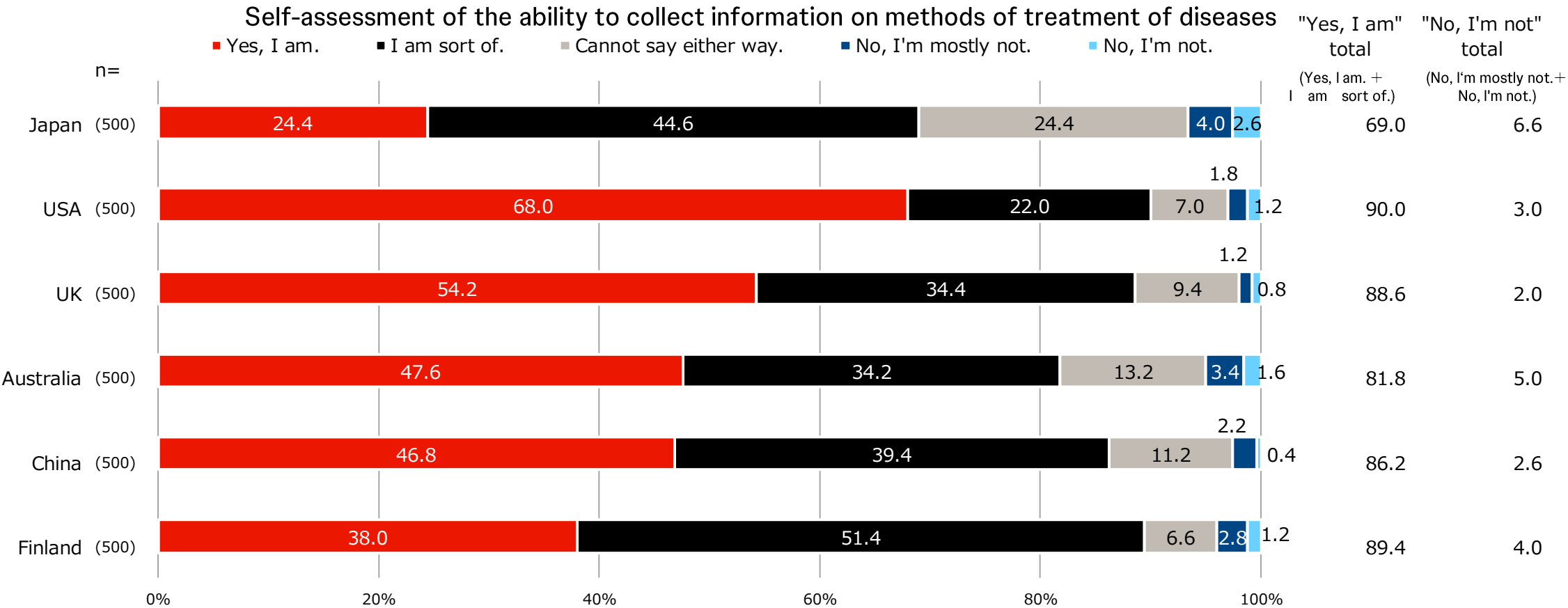


Collection of information on health and medical care, and its sources

Q6 : Are you able to find information on methods of treatment of diseases?
(SA Question target : All)

Collection of information on medical care

- **Japan also had the lowest percentage** of people who answered that they "are able to find information on methods of treatment of diseases" (total of "Yes, I am." + "I am sort of."), **at 69.0%.**
- In the five countries other than Japan, the percentage of people who answered that they "are able to find information on methods of treatment of diseases" (total of "Yes, I am." + "I am sort of.") was in the 80-90% range, with the United States having the highest percentage (90.0%), followed by Finland (89.4%).

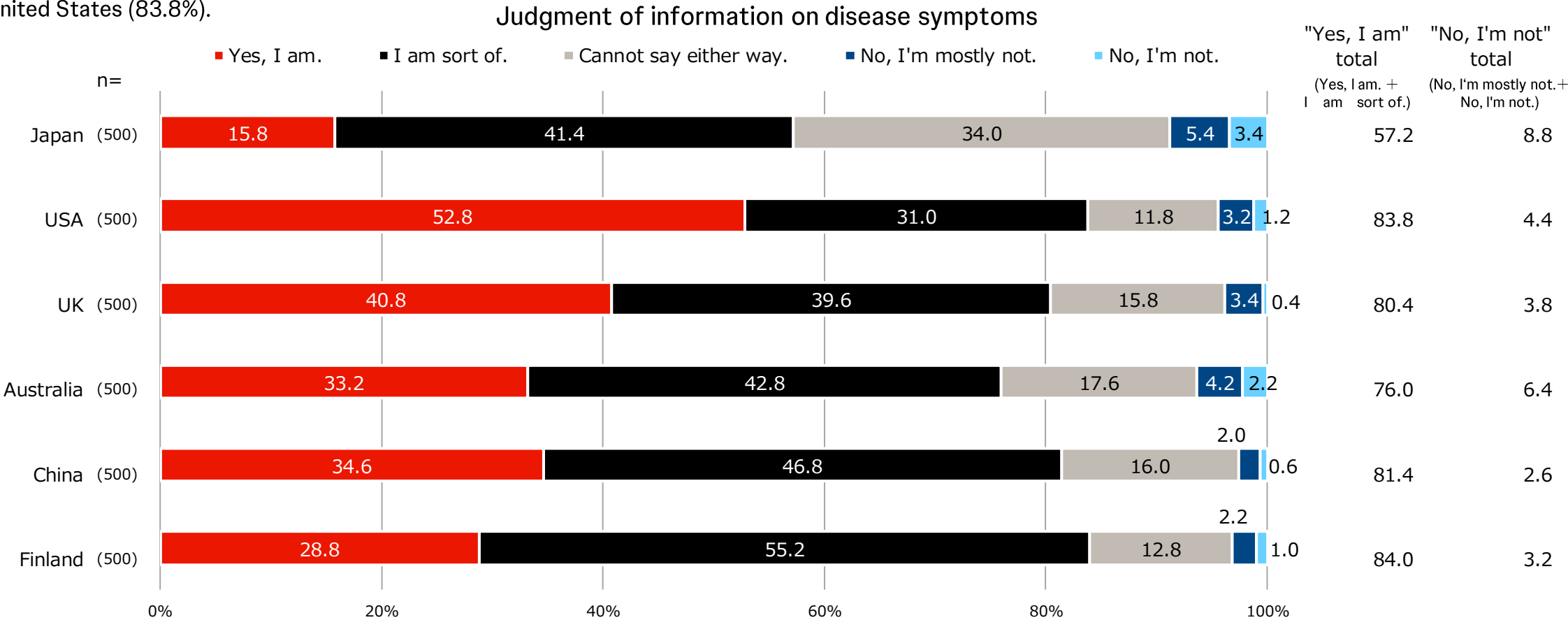


Judgment of information on health and medical care

Q10 : Are you able to judge whether the information you find on symptoms of diseases are correct?
(SA Question target : All)

Judgment of information on medical care

- Japan had the lowest percentage of people who answered that they “are able to judge whether the information you find on symptoms of diseases are correct” (total of “Yes, I am.” + “I am sort of.”), at 57.2%.
- In the five countries other than Japan, the percentage of people who answered that they “are able to judge whether the information you find on symptoms of diseases are correct” (total of “Yes, I am.” + “I am sort of.”) was in the range of 70% to 80%, with Finland having the highest percentage (84.0%), followed by the United States (83.8%).

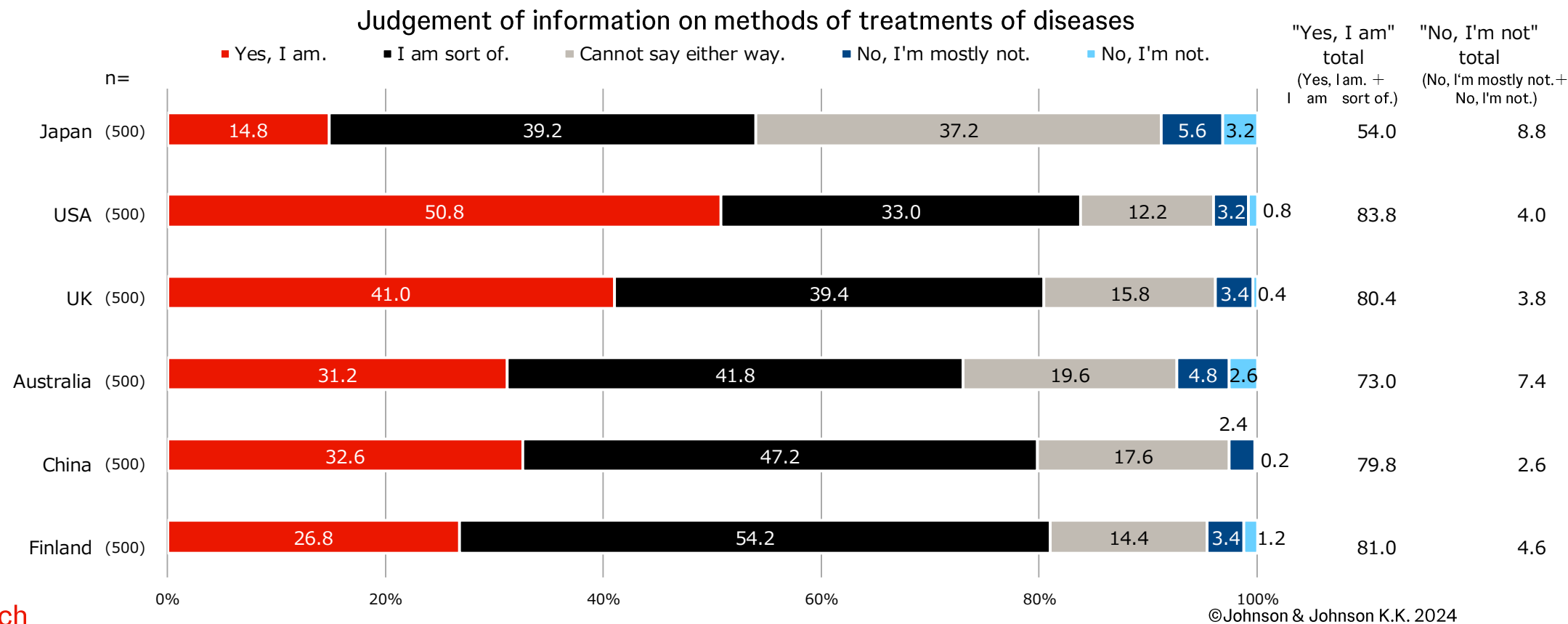


Judgment of information on health and medical care

Q11 : Are you able to judge whether the information you find on methods of treatments of diseases are correct?
(SA Question target : All)

Judgment of information on medical care

- **Japan also had the lowest percentage** of people who answered that they “are able to judge whether the information you find on methods of treatments of diseases are correct” (total of “Yes, I am.” + “I am sort of.”), **at 54.0%.**
- In the five countries other than Japan, the percentage of people who answered that they “are able to judge whether the information you find on methods of treatments of diseases are correct” (total of “Yes, I am.” + “I am sort of.”) was in the high 70% to low 80% range, with the United States having the highest percentage (83.8%), followed by Finland (81.0%).



Criteria for judging health and medical care information

Q13 : What criteria do you use to judge whether the health and medical information you find is reliable?
(MA Question target : All)

- In Japan, the UK, Australia and China, the top three criteria for determining whether the health or medical information are reliable are **"The information is communicated by healthcare professionals such as doctors"**, **"The information is communicated by medical institutions such as hospitals"**, and **"The information is communicated by the government or public institutions of my country."** In the US and Finland, the third most common answer was "Scientific rationale (evidence) supporting the information is provided."

Criteria for judging health and medical information to be correct

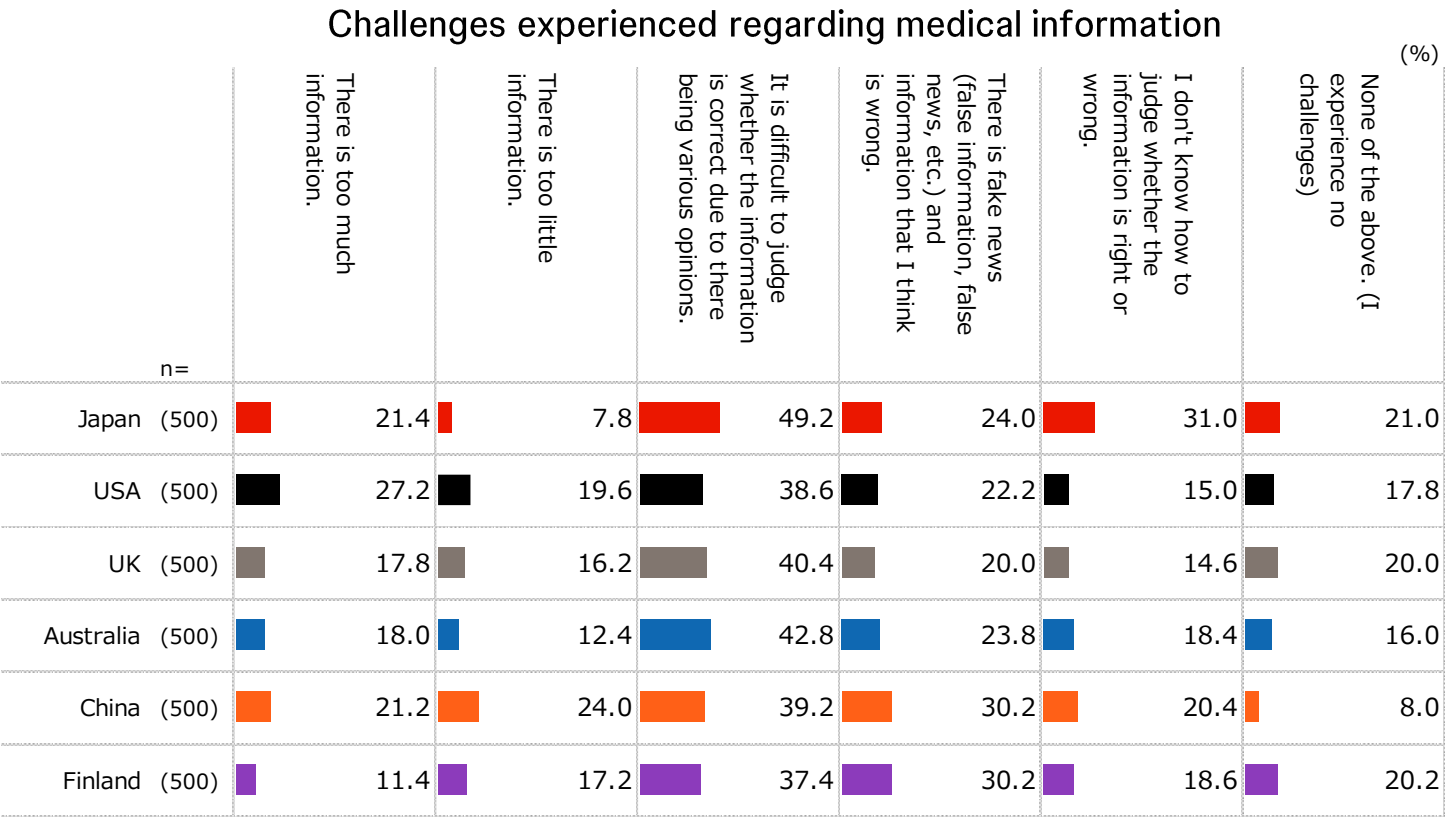
													(%)
n=	The information is communicated by healthcare professionals such as doctors.	The information is communicated by medical institutions such as hospitals.	The information is communicated by the government or public institutions of my country.	The information is communicated by international organizations.	The information is communicated by famous people I know (on TV or the Internet).	The information is communicated by healthcare companies such as pharmaceutical, medical device / medtech (medical technology).	Scientific rationale (evidence) supporting the information is provided.	It is reported by the TV, newspapers, radio, magazines, or other mass media.	It is reported on an Internet news article.	It is reported on multiple articles.	It has become a hot topic on social media. (Many people are talking about, giving likes, or reposting the topic.)	Family or friends/acquaintances, etc. say it is correct.	Other.
Japan (500)	62.6	54.8	31.4	15.0	6.6	18.0	31.0	13.0	11.6	17.8	5.4	11.8	5.6
USA (500)	75.0	56.8	38.2	21.0	15.0	35.8	40.0	18.6	14.2	18.8	9.0	11.0	3.0
UK (500)	78.6	68.8	50.4	21.2	8.2	28.4	35.0	14.8	12.0	16.2	4.8	11.8	1.6
Australia (500)	72.6	59.4	42.6	19.6	7.6	26.2	36.4	15.0	9.0	13.6	5.2	10.8	1.8
China (500)	54.0	56.0	50.4	26.4	20.6	46.2	30.8	23.6	30.2	20.0	30.2	21.2	1.2
Finland (500)	82.2	70.0	43.4	29.8	3.4	24.6	55.6	18.2	9.4	16.8	3.6	10.6	4.2

Challenges experienced regarding health and medical care information

Medical care information

- In all countries, **the most common problem with medical information was "It is difficult to judge whether the information is correct due to there being various opinions"** (about 40-50%).
- The percentage of people who answered "I don't know how to judge whether the information is right or wrong" was about 10-20% in countries other than Japan, but was 31.0% in Japan.

Q12-2 : What challenges, if any, do you experience when looking for information about health and medical information? Please select all that apply from the following for both topics.
 ‘Medical information’ = information on disease prevention, early detection, disease treatment, post-treatment care, and medical consultations.
 (MA Question target : All)



Actions

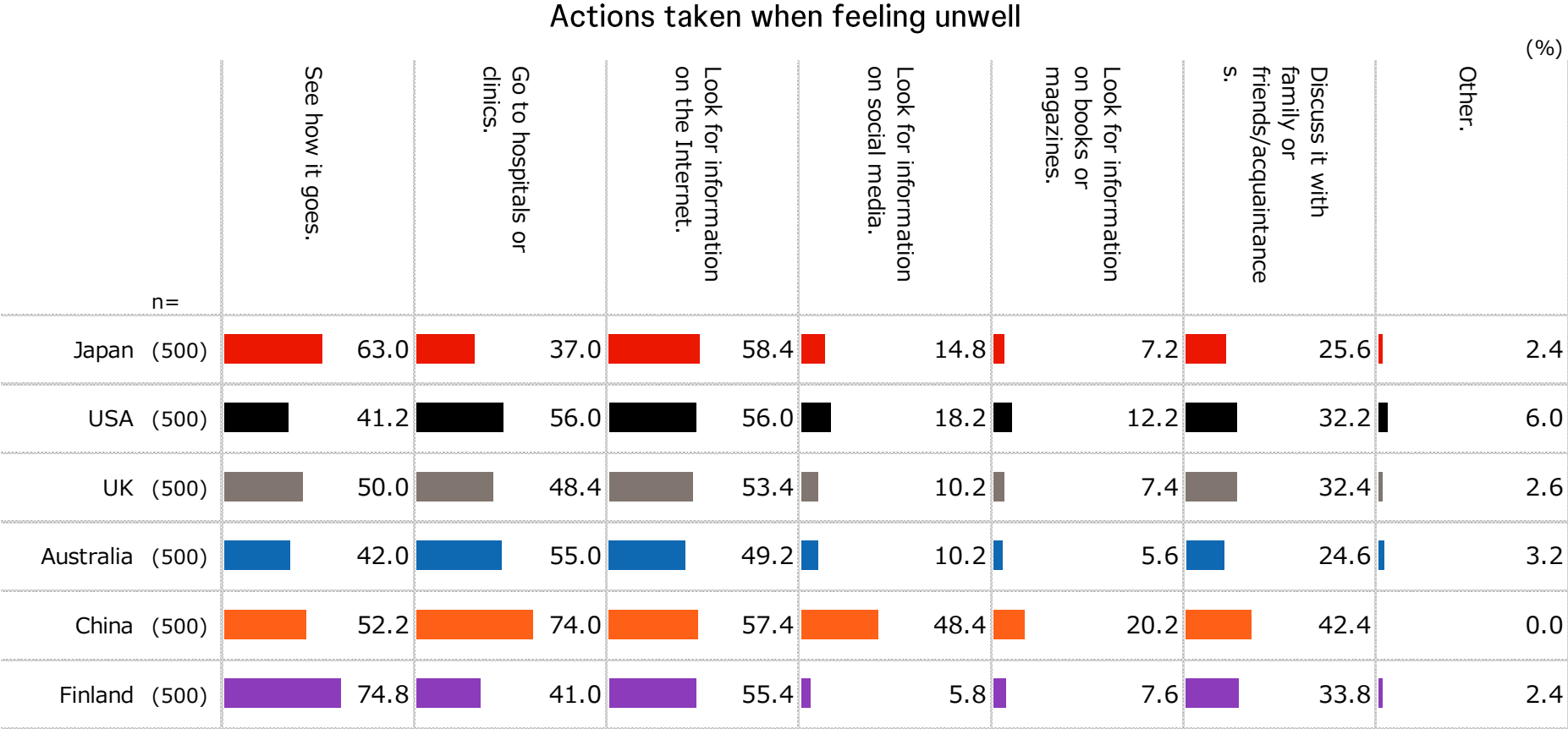
Actions

- Actions taken when feeling unwell
- Reasons for seeking medical care when feeling unwell
- Seeking appropriate medical attention and communicating symptoms
 - Seeking appropriate medical attention
 - Communication of symptoms
- Appropriate action to first signs of major diseases and other situations
- Availability of quick medical assistance
- Pain and suffering
 - Thoughts and attitudes of dealing with pain and suffering
 - Dealing with chronic pain and suffering
 - Reasons for enduring pain and suffering
- Disease prevention and health maintenance
 - Thoughts and actions for disease prevention and health maintenance
 - Reasons for not taking action to prevent disease or maintain health
- Changes in attitudes and behaviors toward seeking medical care before and after the COVID-19 pandemic

Actions taken when feeling unwell

Q16 : What actions do you take when you feel unwell for an unknown reason?
(MA Question target : All)

- When feeling unwell, the top answer in **Japan and Finland is “See how it goes.”** In Australia and China, the top answer is "Go to hospitals or clinics," while in the UK, the top answer is "Look for information on the Internet." In the US, "Go to hospitals or clinics" and "Look for information on the Internet" are tied for top answer.
- In Japan, **the percentage of people who answered "Go to hospitals or clinics" was 37.0%**, the lowest compared to the other five countries.



Reasons for seeking medical care when feeling unwell

Q17 : Please answer this question if you selected "Go to hospitals or clinics." for the previous question. Why did you answer "Go to hospitals or clinics."?
(MA Question target : Persons who go to a hospital or clinic when they are unwell)

- Among those who answered that they would "Go to hospitals or clinics" when feeling unwell, **the most common reason given in Japan was "Because I think a doctor (specialist) should decide what to do rather than me deciding by myself" at 71.4%**, the highest among the six countries.

Reasons for answering "go to a hospital or clinic" when feeling unwell
(Based on persons who go to a hospital or clinic when they feel unwell)

								(%)
n=	Because I think a doctor (specialist) should decide what to do rather than me deciding by myself.	Because it is better to get a doctor's (specialist's) opinion as soon as possible.	Because it is faster than finding information myself or consulting with acquaintances.	Because it is easier than finding information myself or consulting with acquaintances.	Because it is more reliable than finding information myself or consulting with acquaintances.	Other.		
Japan (185)	<div></div> 71.4	<div></div> 58.4	<div></div> 13.0	<div></div> 3.8	<div></div> 14.6			0.5
USA (280)	<div></div> 61.8	<div></div> 65.0	<div></div> 24.3	<div></div> 16.4	<div></div> 32.1			2.1
UK (242)	<div></div> 64.0	<div></div> 69.0	<div></div> 13.6	<div></div> 12.0	<div></div> 34.3			0.4
Australia (275)	<div></div> 58.9	<div></div> 69.5	<div></div> 13.1	<div></div> 8.7	<div></div> 31.3			1.1
China (370)	<div></div> 51.9	<div></div> 66.5	<div></div> 28.4	<div></div> 24.6	<div></div> 35.1			0.0
Finland (205)	<div></div> 57.6	<div></div> 71.7	<div></div> 14.1	<div></div> 9.8	<div></div> 45.9			1.5

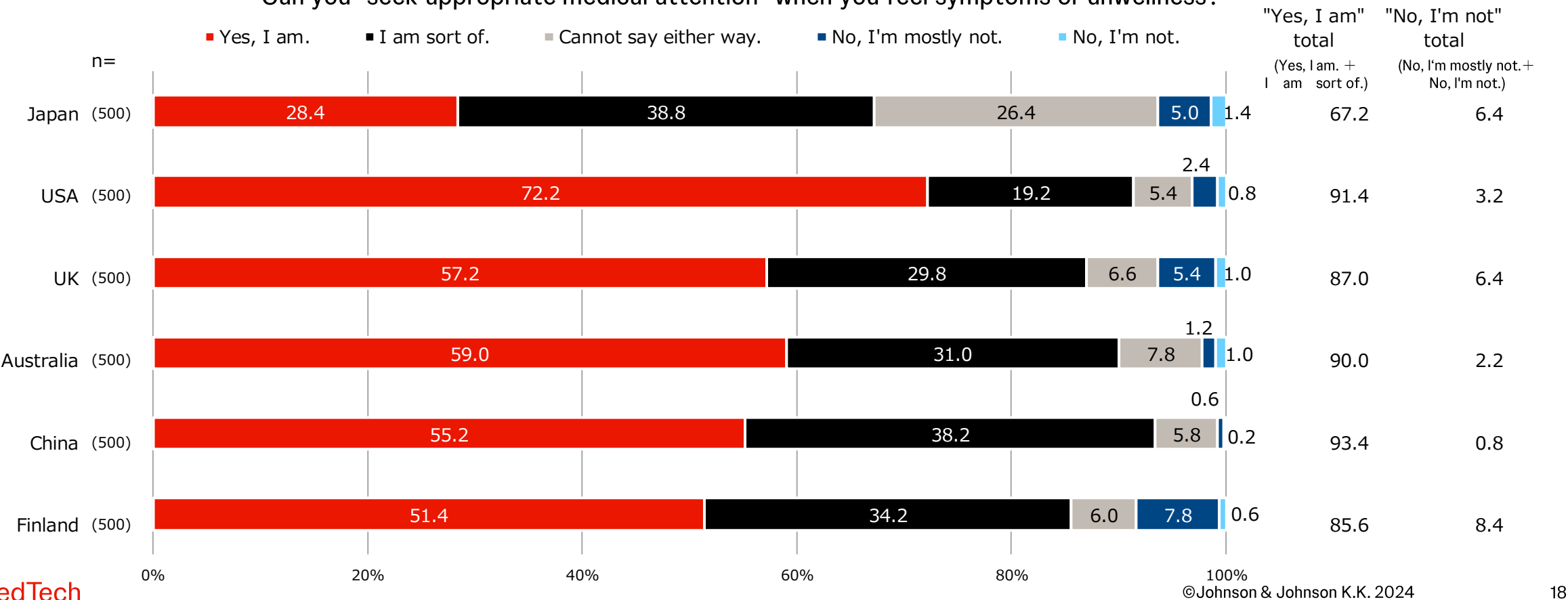
Seeking appropriate medical attention and communicating symptoms

Seeking appropriate medical attention

- In response to the question, "When you feel unwell, are you able to seek the appropriate medical attention and communicate your symptoms precisely?" the percentage of people who answered "Yes, I am" (total of "Yes, I am." + "I am sort of."), was around 90% in all five countries other than Japan, **while in Japan it was only 67.2%.**

Q18-1 : When you feel unwell, are you able to seek the appropriate medical attention* and communicate your symptoms precisely? *'To seek the appropriate/medical attention' = To consult an appropriate medical institution or treatment department at the appropriate timing according to the symptoms or discomfort.
Seeking appropriate medical attention
(SA Question target : All)

Can you "seek appropriate medical attention" when you feel symptoms or unwellness?

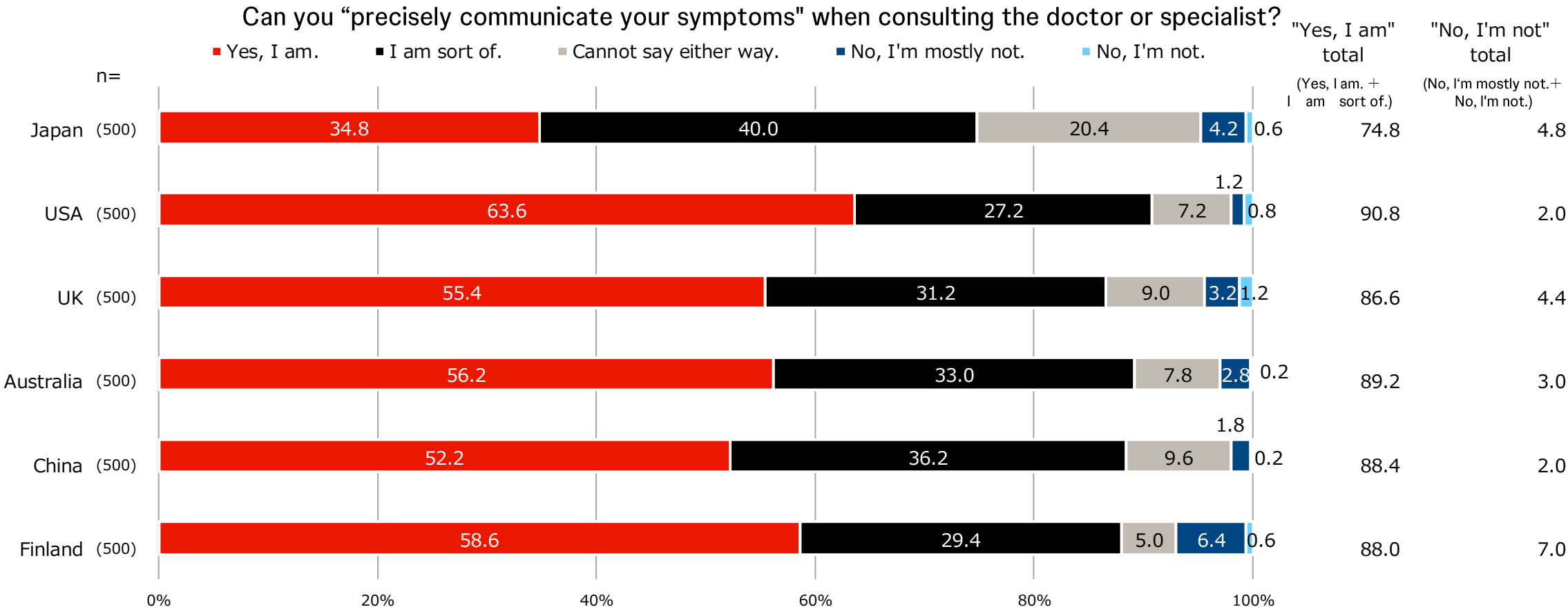


Seeking appropriate medical attention and communicating symptoms

Communication of symptoms to the doctor or specialist

- When feeling unwell or unwell, the percentage of people who answered that they "are able to precisely communicate your symptoms" when consulting the doctor or specialist " (total of "Yes, I am." + "I am sort of."), was around 90% in all five countries other than Japan, while **in Japan it was 74.8%.**

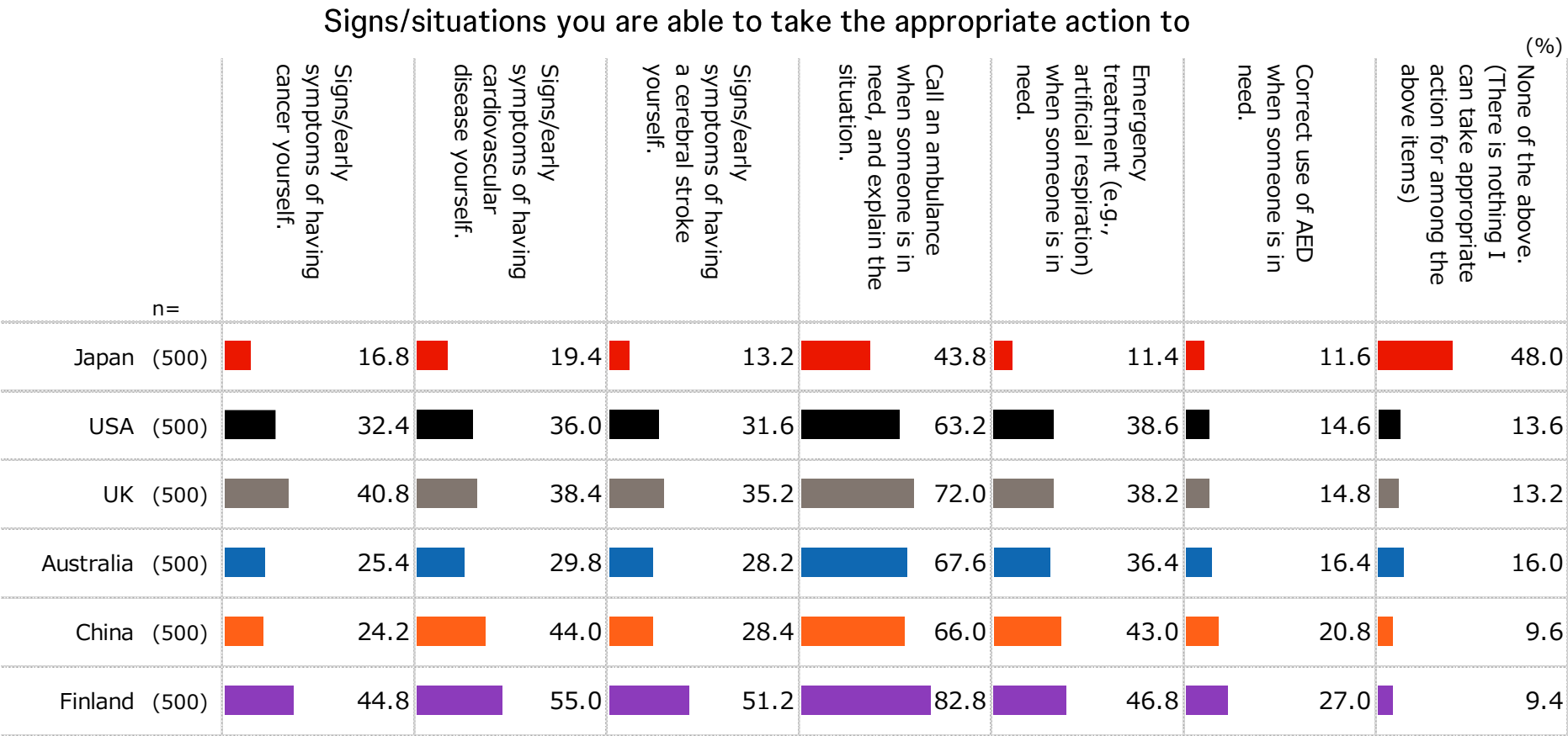
Q18-2 : When you feel unwell, are you able to seek the appropriate medical attention* and communicate your symptoms precisely? *'To seek the appropriate medical attention' = To consult an appropriate medical institution or treatment department at the appropriate timing according to the symptoms or discomfort.
Precise communication of symptoms when consulting the doctor or specialist
(SA Question target : All)



Appropriate action to first signs of major diseases and other situations

- For the percentage of people who answered that they could take appropriate action to the first signs of major diseases -- cancer, cardiovascular disease, and stroke -- Japan ranked last among the six countries for each disease.
- Finland was first in each situation.

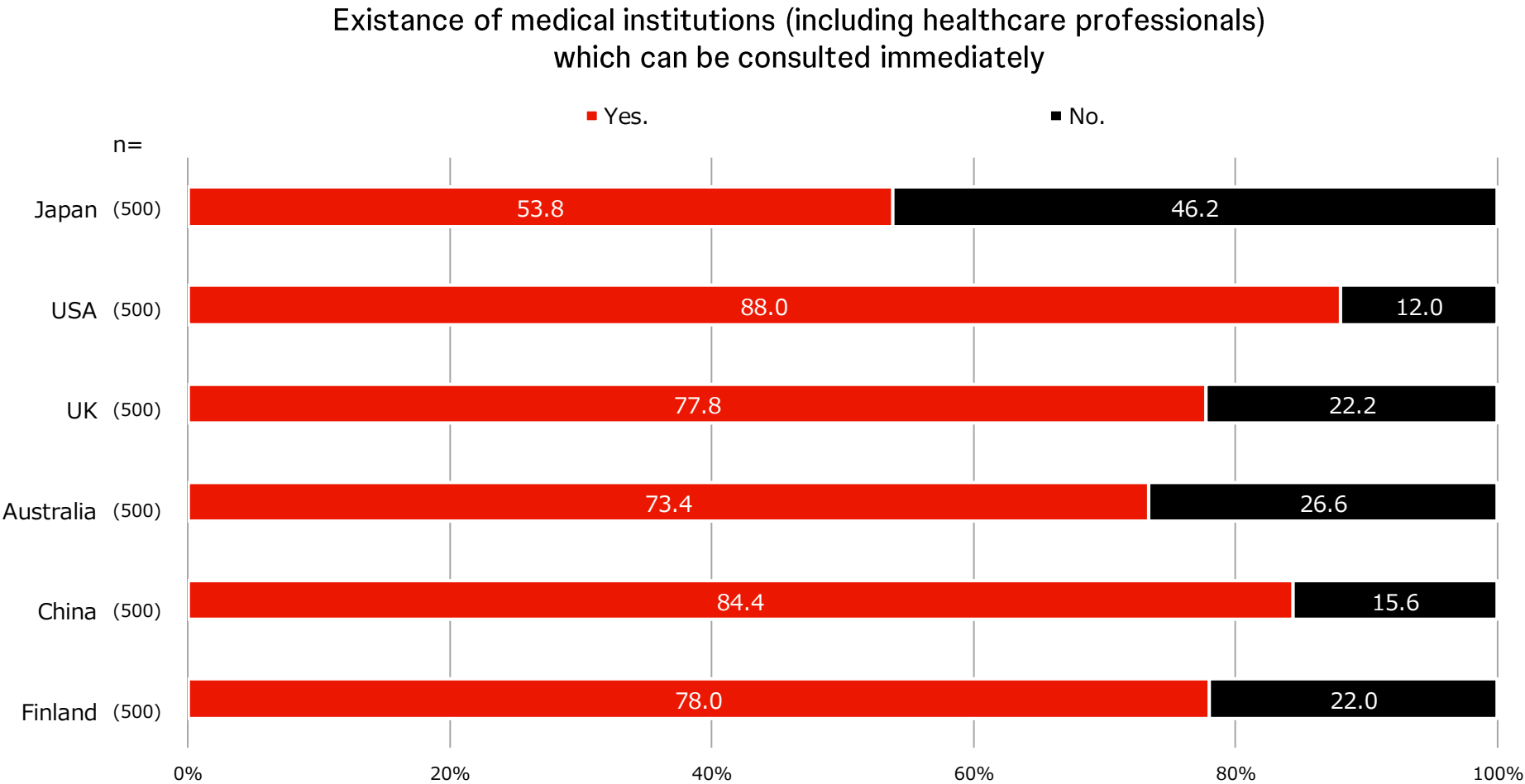
Q19 : Are you able to take appropriate action to the following signs of disease or in the following situations?
From the following, please select all the signs of disease or situations that you are able to take appropriate action.
(MA Question target : All)



Availability of quick medical assistance

- The percentage of people who answered that there is a medical institution (including healthcare professionals) which can be consulted immediately if they feel unwell or discomfort is **53.8% in Japan**, the lowest among the six countries.
- The highest was the United States (88.0%), followed by China (84.4%), Finland (78.0%), the UK (77.8%) and Australia (73.4%).

Q22 : Do you have a medical institution (including healthcare professionals) to which you can consult immediately if you feel unwell or discomfort?
Please select one answer that applies from the following.
(SA Question target : All)



Pain and suffering

Q20 : Please select an answer that applies to you for the following questions.
(Each SA Question target : All)

Thoughts and attitudes of dealing with pain and suffering

- In China, 71.4% and Finland, 30.0% answered that " When I feel chronic pain or distress in my daily life, I seek medical attention immediately." In the other four countries, including Japan, it is roughly half (40% to 50% range).
- In five countries, including Japan (50.6%), more than half of people answered that "**When I feel chronic pain and distress in my daily life, I endure it as much as possible.**"
- In Japan, China and Finland, more than 70% of people answered that " I feel that, to some extent, the pain and distress of treatment cannot be helped."

Thoughts and response to chronic pain and suffering

		(%)											
		I am currently experiencing chronic pain and distress, but I am enduring it.	When I feel chronic pain and distress in my daily life, I endure it as much as possible.	When I feel chronic pain or distress in my daily life, I seek medical attention immediately.	When I feel chronic pain or distress (other than those that are chronic) in my daily life, I endure it as much as possible.	When I feel unwellness, pain, or distress (other than those that are chronic) in my daily life, I seek medical attention immediately.	When I feel unwellness, pain, or distress (other than those that are chronic) in my daily life, I seek medical attention immediately.	I feel that, to some extent, the pain and distress of treatment cannot be helped.	I wish to consider methods of treatment that do not cause pain or distress.	I wish to consider methods of treatment bearing in mind their safety.	I wish to consider methods of treatment bearing in mind the daily QOL (quality of life) during and after the treatment.		
n=													
Japan	(500)	<div></div> 20.2	<div></div> 42.2	<div></div> 45.6	<div></div> 50.6	<div></div> 42.0	<div></div> 74.2	<div></div> 83.8	<div></div> 90.0	<div></div> 83.0			
USA	(500)	<div></div> 30.4	<div></div> 53.6	<div></div> 54.0	<div></div> 55.0	<div></div> 58.2	<div></div> 43.0	<div></div> 80.0	<div></div> 88.2	<div></div> 83.8			
UK	(500)	<div></div> 16.2	<div></div> 50.4	<div></div> 46.8	<div></div> 64.4	<div></div> 42.8	<div></div> 44.0	<div></div> 83.4	<div></div> 90.6	<div></div> 89.0			
Australia	(500)	<div></div> 20.6	<div></div> 47.4	<div></div> 50.0	<div></div> 56.0	<div></div> 50.6	<div></div> 44.6	<div></div> 73.4	<div></div> 83.8	<div></div> 82.6			
China	(500)	<div></div> 17.6	<div></div> 30.8	<div></div> 71.4	<div></div> 25.6	<div></div> 71.8	<div></div> 70.0	<div></div> 77.8	<div></div> 84.6	<div></div> 80.2			
Finland	(500)	<div></div> 35.8	<div></div> 56.0	<div></div> 30.0	<div></div> 64.2	<div></div> 32.2	<div></div> 71.0	<div></div> 73.6	<div></div> 89.6	<div></div> 91.2			

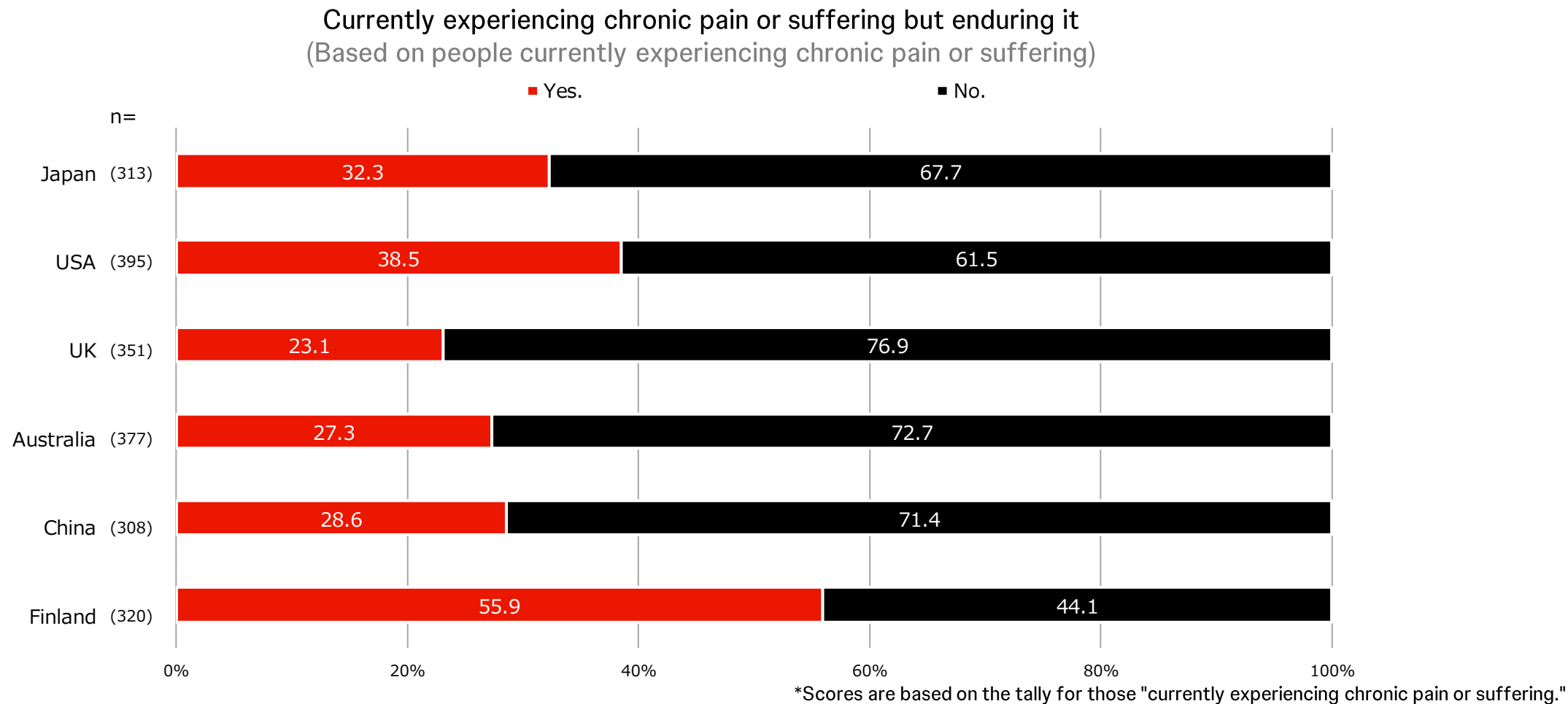
* Score is a list of "Yes" answers

Pain and suffering

Dealing with chronic pain and suffering

Q20-1: Please select an answer that applies to you for the following questions. I am currently experiencing chronic pain and distress, but I am enduring it.
(Each SA Question target : All)

- Looking only at those who "people currently experiencing chronic pain or suffering," the percentage of those who are **“currently experiencing chronic pain or suffering but enduring it” was 32.3% in Japan**. Approximately one in three people who are experiencing pain or suffering are enduring it. Among the six countries, Finland had the highest percentage of people who are enduring it, at 55.9%.



Pain and suffering

Reasons for enduring pain and suffering

- The top three reasons given for enduring chronic pain and suffering in Japan, the United States, the United Kingdom, Australia, and China were **"Because the pain or distress is tolerable," "Because although I feel pain or distress, it doesn't interfere with my daily life,"** and **"Because it is troublesome to seek medical attention."**

Q21-1: If you selected "Yes" for items "I am currently experiencing chronic pain and distress, but I am enduring it." in the previous question, why do you endure it?
(MA Question target : people who endure chronic pain and suffering)

Reason for answering "I am currently experiencing chronic pain and suffering, but I am enduring it"
(Based on people enduring chronic pain and suffering)

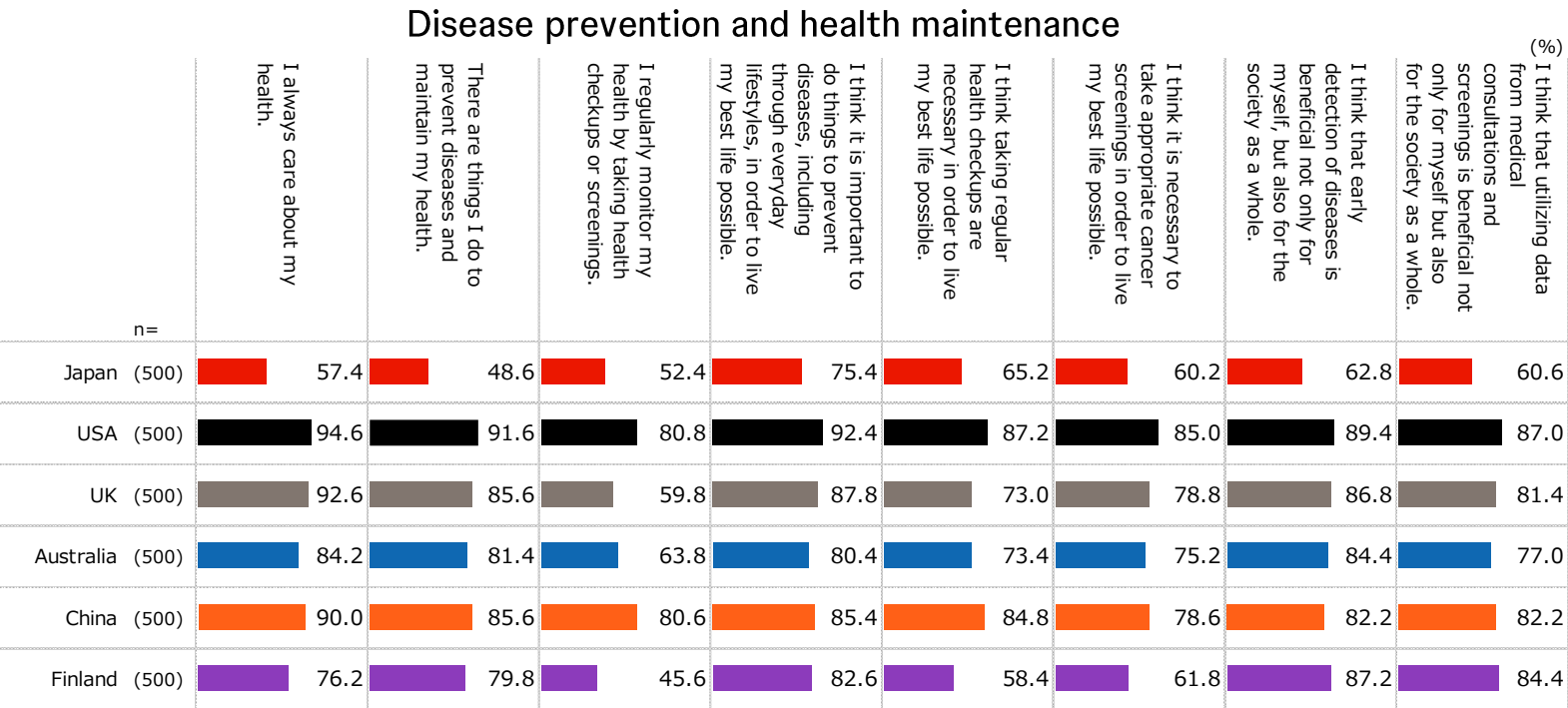
															(%)
	n=	Because the pain or distress is tolerable.	Because although I feel pain or distress, it doesn't interfere with my daily life.	Because it is troublesome to seek medical attention.	Because I don't think it will get cured even if I seek medical attention.	Because I don't want to end up needing surgery (because I am scared of surgery).	Because I think it will take time to recover / Because I don't want to go to medical institutions for a long period of time.	Because it is difficult to go to a medical institution for reasons such as it being far away. (Because it is difficult to access.)	Because it takes time to visit a medical institution. (Because I don't have time.)	Because it costs money to go to a medical institution.	Other.				
Japan	(101)	60.4	48.5	26.7	21.8	8.9	11.9	7.9	13.9	27.7	7.9				
USA	(152)	49.3	32.9	30.9	25.0	18.4	21.7	9.9	10.5	10.5	7.9				
UK	(81)	42.0	30.9	28.4	30.9	16.0	18.5	7.4	9.9	11.1	16.0				
Australia	(103)	35.0	30.1	29.1	32.0	13.6	12.6	12.6	9.7	18.4	13.6				
China	(88)	59.1	58.0	36.4	15.9	14.8	29.5	10.2	10.2	10.2	0.0				
Finland	(179)	38.5	34.6	32.4	48.6	9.5	3.9	6.7	3.4	20.7	15.6				

Disease prevention and health maintenance

Q26 : Please select an answer that applies to you for the following.(Each SA Question target : All)

Thoughts and actions for disease prevention and health maintenance

- Of the eight items asked about disease prevention and health maintenance, Japan had the lowest scores among the six countries in seven items (except "I think taking regular health checkups are necessary in order to live my best life possible"), revealing that **awareness of disease prevention and health maintenance is generally low.**
- In particular, **less than half (48.6%) of people in Japan answered "There are things I do to prevent diseases and maintain my health" (total of "applicable" and "somewhat applicable")**, the lowest among the six countries. Regarding the significance of disease prevention and early detection, the percentage of people who answered "I think that early detection of diseases is beneficial not only for myself, but also for the society as a whole" was over 80% in all countries other than Japan, but in Japan it was only 62.8%, and the percentage of people who thought "I think that utilizing data from medical consultations and screenings is beneficial not only for myself but also for the society as a whole" was also low (60.6%), the lowest among the six countries.



* Score is the total of "applicable" and "somewhat applicable".

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Disease prevention and health maintenance

Reasons for not taking action to prevent disease or maintain health

Q27 : Please answer this question if you answered “Not very applicable” or “Not applicable” for item “There are things I do to prevent diseases and maintain my health.” in the previous question. Please tell us the reasons for your answer.
(MA Question target : those who do not do anything to prevent diseases and maintain health)

- The reasons for not taking action to prevent illness or maintain health vary by country, but in Japan, **"Because it is costly and I feel that it is a financial burden" and "Because I don't know what to do"** are tied for the top reason. In the United States and Finland, the top reason is also economic, with "Because it is costly and I feel that it is a financial burden." In the UK and Australia, the top reason is "Because I can easily seek medical attention whenever I feel unwell." In China, the top reason is "Because I don't have time."

Reasons for not taking action to prevent disease or maintain health
(Based on those who do not do anything to prevent diseases and maintain health)

		Because I have no concerns about my health.	Because I don't feel the need to take any preventive action.	Because I can easily seek medical attention whenever I feel unwell.	Because I don't have time.	Because it is costly and I feel that it is a financial burden.	Because I don't know what to do.	Other.	(%)
n=									
Japan	(124)	 28.2	 8.1	 16.9	 19.4	 39.5	 39.5	 8.9	
USA	*(13)	 23.1	 7.7	 30.8	 15.4	 46.2	 23.1	 7.7	
UK	*(22)	 18.2	 9.1	 27.3	 22.7	 9.1	 36.4	 4.5	
Australia	(35)	 14.3	 14.3	 37.1	 14.3	 34.3	 20.0	 2.9	
China	*(26)	 7.7	 53.8	 42.3	 57.7	 46.2	 26.9	 0.0	
Finland	(44)	 18.2	 22.7	 34.1	 4.5	 38.6	 18.2	 27.3	

* Figures less than n=30 are for reference only
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Changes in attitudes and behaviors toward seeking medical care before and after the COVID-19 pandemic

Q29 : Have your attitude and behavior toward seeking medical attention changed since the COVID-19 pandemic?
(MA Question target : All)

- Regarding changes in attitudes and behavior toward seeking medical care before and after the COVID-19 pandemic, **the most common answer in Japan was "My attitude and behavior have not changed since the COVID-19 pandemic" (50.0%)**, the second highest percentage after Finland (59.0%) (all five countries other than China had "No change" as the top answer).
- Meanwhile, in China, the top answer was "I have started or enhanced my own health management as I have become more aware of my health," and the percentage of respondents who answered was higher than other countries in many items except for "My attitude and behavior have not changed since the COVID-19 pandemic."

Changes in attitudes and behavior towards seeking medical care after the COVID-19 pandemic



Digital utilization

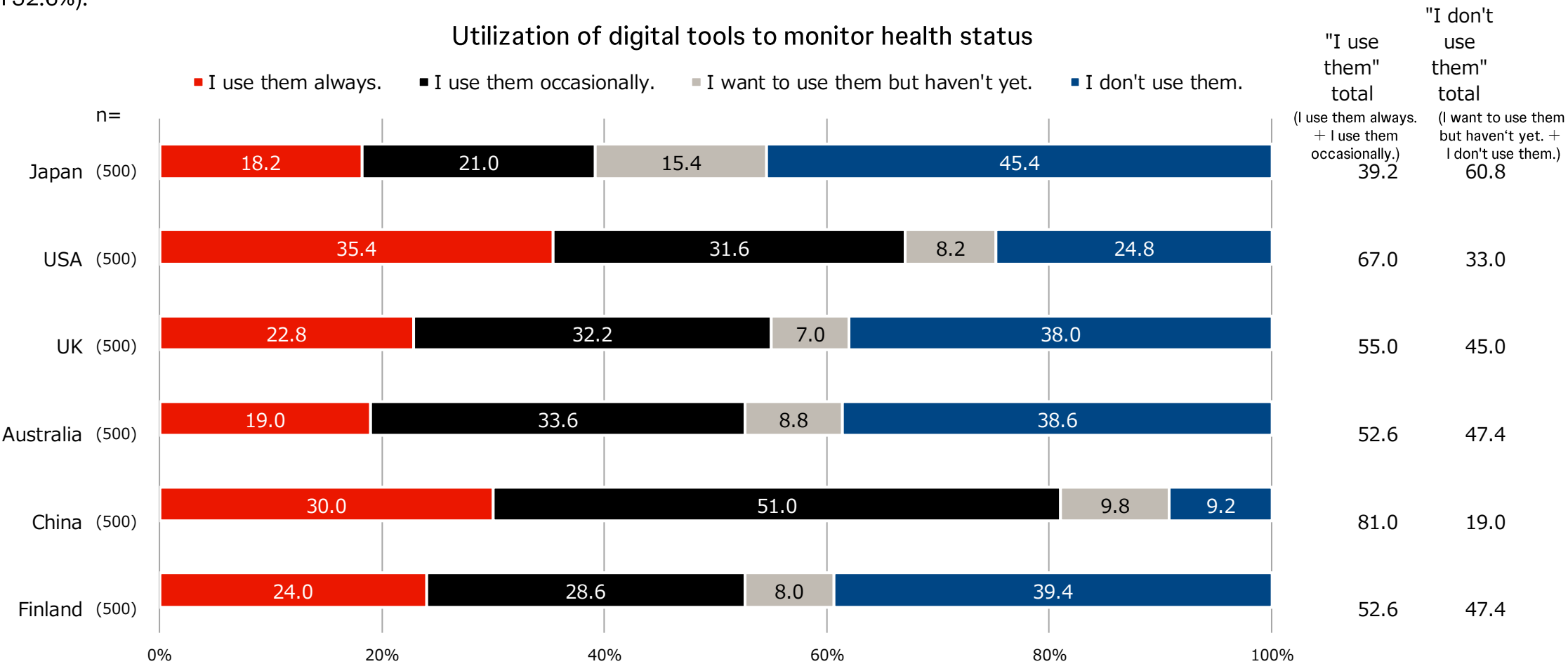
Digital Utilization

- Use of digital tools in health management
- Reasons for using digital tools
- Thoughts on digitalization and data utilization in medical care
- Expectation toward digitalization in medical care

Use of digital tools in health management

Q36 : Do you use any digital tools (such as smart watches, activity monitors, or smartphone health apps) to monitor your health?
(SA Question target : All)

- The percentage of people who use digital tools to monitor their health (always + occasionally) is **39.2% in Japan**, the lowest among the six countries. The percentage of people who use digital tools is high in China (81.0%), followed by the United States (67.0%), the UK (55.0%), and Australia and Finland (both 52.6%).



Reasons for using digital tools

Q37 : Please answer this question if you answered "I use them always" or "I use them occasionally" for the previous question.
Please answer why you use them.
(MA Question target : Users of health-related digital tools)

- The top reason for using digital tools to monitor health in Japan, the US, the UK and China was " **Because they make it easy to understand my daily health.**" In Australia, the top reason was " Because they make it easy to record multiple statistics about my body," while in Finland, the top reason was " Because they enable me to accumulate data."

Reason for using digital tools
(Based on users of health-related digital tools)

(%)	Other.	Because they make it easy to explain my physical condition to doctors or healthcare professionals.	Because I can judge whether I should go see a doctor by checking the changes in my body using the data (Or, because in the past, using them has led me to seeking medical attention or helped me detect a problem early).	Because they have gotten cheaper.	Because they enable me to accumulate data.	Because they are easy to continue.	Because they make it easy to record multiple statistics about my body.	Because they make it easy to understand my daily health.	n=
5.6	11.7	8.2	14.8	45.9	43.9	22.4	60.2	Japan (196)	
1.8	19.7	29.3	17.9	40.3	44.2	47.2	65.1	USA (335)	
2.9	14.9	21.8	15.3	36.7	35.6	47.6	58.5	UK (275)	
3.0	14.4	20.2	16.3	35.4	35.7	50.2	49.0	Australia (263)	
0.0	24.2	53.1	23.2	48.4	36.8	60.2	62.5	China (405)	
4.2	10.6	9.9	10.3	64.6	44.5	49.0	47.1	Finland (263)	

Thoughts on digitalization and data utilization in daily life and medical care

Q38-3 : What do you think about digitalization and data utilization in daily life and medical care? (Assuming privacy is protected.)
< Digitalization of medical care (examinations, diagnoses, treatments, etc.) >
(MA Question target : All)

Digitalization and data utilization in medical care

- Regarding "digitalization and digital utilization in medical care (examination, diagnosis, treatment, etc.)," the percentage of people who answered that "It will be good if digitalization and data utilization progress" was **42.0% in Japan**, while in Finland (56.4%) and China (53.4%) it was over 50%. The other three countries were in the 30% range (US: 32.6%, UK: 35.6%, Australia: 33.8%).

Thoughts on digitalization and data utilization in medical care

						(%)
	Increased digitalization and data utilization are essential.	It will be good if digitalization and data utilization progress.	It will be good if data on individuals gets returned to and utilized for society as a whole.	I want to know more about digitalization and data utilization.	None of the above.	
n=						
Japan (500)	<div></div> 25.8	<div></div> 42.0	<div></div> 18.4	<div></div> 12.6	<div></div> 29.4	
USA (500)	<div></div> 33.2	<div></div> 32.6	<div></div> 25.0	<div></div> 25.4	<div></div> 9.8	
UK (500)	<div></div> 21.0	<div></div> 35.6	<div></div> 25.6	<div></div> 19.8	<div></div> 18.0	
Australia (500)	<div></div> 19.8	<div></div> 33.8	<div></div> 24.4	<div></div> 21.0	<div></div> 17.2	
China (500)	<div></div> 34.2	<div></div> 53.4	<div></div> 44.6	<div></div> 30.0	<div></div> 1.2	
Finland (500)	<div></div> 26.6	<div></div> 56.4	<div></div> 23.8	<div></div> 16.0	<div></div> 11.8	

Expectation toward digitalization in medical care

Q40 : What do you think the spread of digitalization in medical care (examinations, diagnoses, treatments, etc.) will bring about?
(MA Question target : All)

- When asked what they expect from the spread of "digitalization in medical care (examinations, diagnosis, treatment, etc.)," the top three answers in Japan, the United States, and China were **"It will enable early detection and early treatment of diseases," "It will help people manage their own health," and "It will lead to more appropriate treatments"** (in China, "It will help people manage their own health" was the top answer). In the UK and Australia, the top three answers were "It will enable early detection and early treatment of diseases," "It will lead to more appropriate treatments," and "It will lead to more precise treatment." In Australia, "It will lead to more precise treatment" came in second. In Finland, after "Early detection and treatment" and "More precise treatment," "It will make it easier to communicate information to healthcare professionals" came in third.

What can be expected from the spread of digitalization and data use in medical care

													Other.		(%)
	It will enable early detection and early treatment of diseases.	It will lead to more appropriate treatments.	It will lead to better QOL (quality of life) during and after treatment.	It will lead to more precise treatment.	It will increase healthy life expectancy.	It will help people manage their own health.	It will make it easier to communicate information to healthcare professionals.	It will improve the quality of medical care.	It will lower the psychological hurdles to surgery and other forms of treatment.	It will reduce the burden on medical institutions, and increase their labor productivity.	It will reduce individual people's medical expenses.	It will encourage preventive action and help optimize public spending on medical care.			
n=															
Japan (500)	44.0	38.2	21.0	32.8	18.0	41.2	27.6	24.0	6.6	18.2	14.4	13.6			10.8
USA (500)	52.0	46.2	32.0	46.0	35.6	46.2	40.6	36.0	22.6	22.4	18.6	19.0			6.0
UK (500)	53.2	46.0	29.6	45.2	34.4	44.4	29.4	34.0	19.0	25.2	17.2	21.2			8.0
Australia (500)	47.0	44.0	25.0	45.4	27.6	42.0	30.4	34.6	16.4	24.2	17.0	20.0			5.8
China (500)	48.0	44.4	34.8	39.2	28.8	52.8	35.2	48.2	24.8	25.2	15.0	12.6			0.0
Finland (500)	56.8	48.4	32.4	52.6	28.6	45.8	51.0	32.8	16.4	31.0	24.2	31.6			6.2

Communication

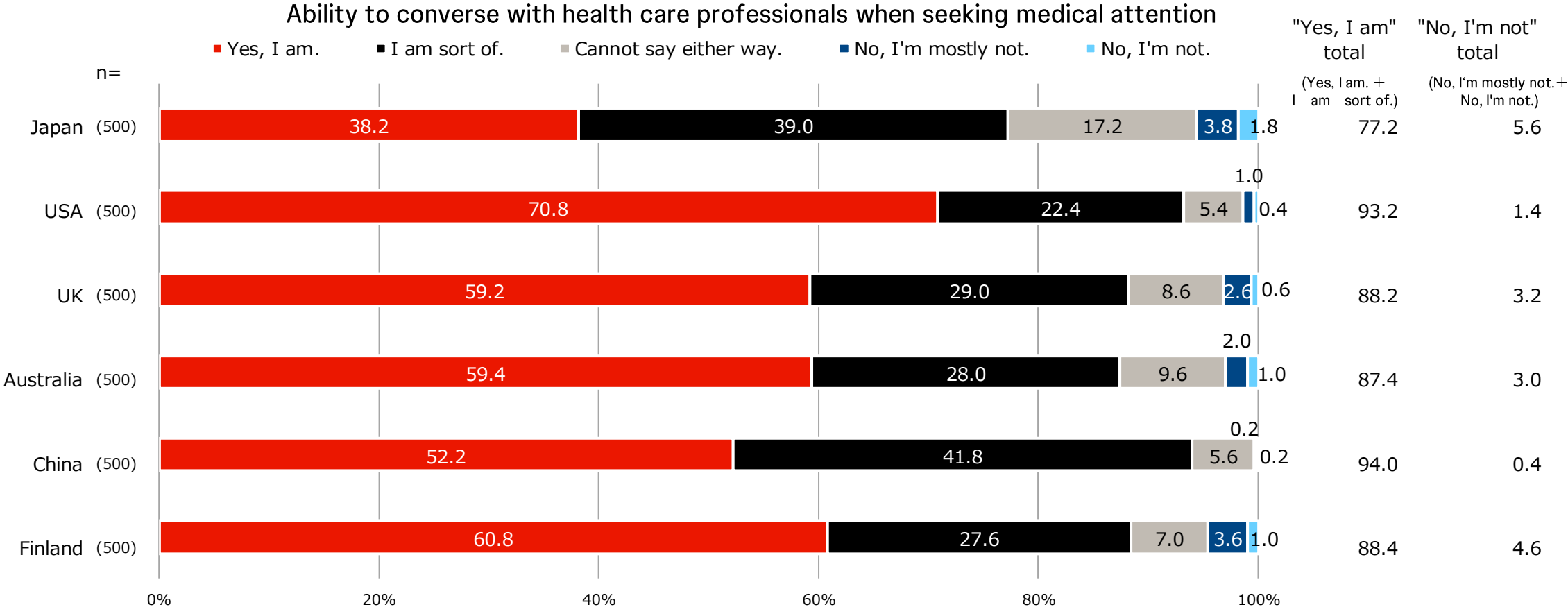
Communication

- Dialogue with health care professionals during medical visits
- Attitudes and actions when communicating with doctors during medical visits
- Proactive involvement
 - Intention for proactive involvement
 - Self-assessment of proactive involvement
 - Benefits of proactive involvement
- What it takes to be proactively involvedOpinions on what you need
 - Intention to acquire information and knowledge
 - Acquisition reality of information and knowledge

Dialogue with health care professionals during medical visits

- The percentage of people who answered that they “Are you able to converse with healthcare professionals (doctors, nurses, pharmacist, etc.) when you seek medical attention” (total of “Yes, I am.” + “I am sort of.”), **was less than 40% (38.2%) in Japan**, the lowest among the six countries. In all of the other five countries, the figure was over 50%, and in the United States, 70.8% answered that they “are able.”

Q30 : Are you able to converse with* healthcare professionals (doctors, nurses, pharmacist, etc.) when you seek medical attention?
*Converse with = Get deeper understanding of their (HCPs') explanations, ask them questions, and tell them what you think.
(SA Question target : All)



Attitudes and actions when communicating with doctors during medical visits

Q31: Please select what applies to you when communicating with doctors when seeking medical attention. Please choose all that apply from the following.
If you have never experienced the following situations, please imagine and answer.
(MA Question target : All)

- In both Japan and China, less than half of people answered that "Before going to see the doctor, I decide what I want to talk to or ask them about" (Japan: 47.2%, China: 41.2%).
- Japan had the lowest response rate of 32.8% for "I can talk to doctors without being nervous" among the six countries.
- The percentage of people who answered that "I can communicate my thoughts about treatments in light of QOL (quality of life) of my daily life during and after treatment" was 10.2% in Japan, the lowest of the six countries.
- Japan also ranked last among the six countries at 4.2% for "I discuss my feelings and values during the consultation."

Communication with doctors when visiting medical facilities

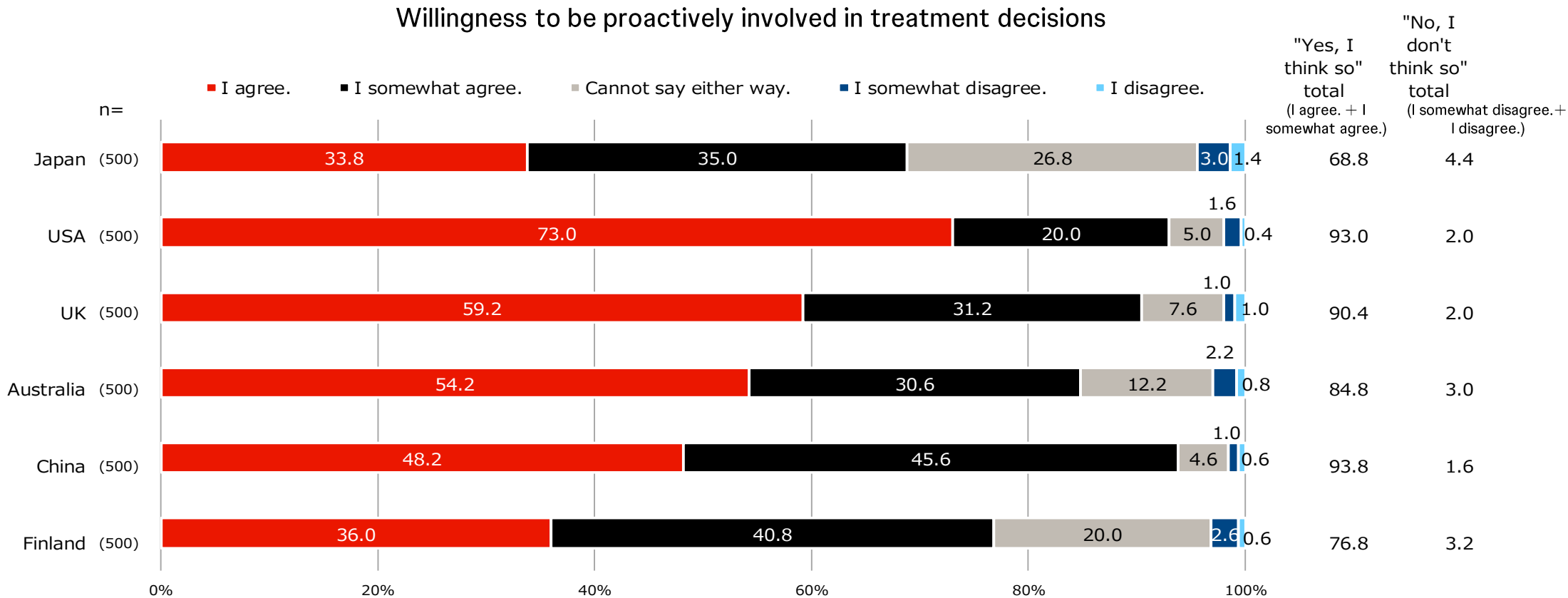
Communication with doctors when visiting medical facilities																				(%)
		Before going to see the doctor, I decide what I want to talk to or ask them about.	Before going to see the doctor, I find information about diseases and methods of treatment myself.	Before going to see the doctor, I find information about surgical procedures myself.	I can talk to doctors without feeling nervous.	I can accurately describe my symptoms.	I can communicate my preferences regarding methods of treatment.	I always tell the doctor any information I have found in advance about diseases or methods of treatment.	I can communicate my thoughts about treatments in light of QOL (quality of life) of my daily life during and after treatment.	I always understand what the doctor says about my disease and methods of treatment.	I always ask questions if there is anything I don't understand about explanations.	I always check the pros and cons of treatments recommended by the doctor.	I discuss things to my satisfaction if my opinions are different from the doctor's recommendations about methods of treatment.	I discuss my feelings and values during the consultation.	By the end of the consultation, I have discussed everything I was thinking about at the start, and have no questions left to ask.	None of the above.				
n=																				
Japan	(500)	<div><div></div></div> 47.2	<div><div></div></div> 26.4	<div><div></div></div> 11.0	<div><div></div></div> 32.8	<div><div></div></div> 34.6	<div><div></div></div> 18.0	<div><div></div></div> 11.2	<div><div></div></div> 10.2	<div><div></div></div> 12.2	<div><div></div></div> 32.2	<div><div></div></div> 12.8	<div><div></div></div> 5.6	<div><div></div></div> 4.2	<div><div></div></div> 6.0	<div><div></div></div> 17.6				
USA	(500)	<div><div></div></div> 64.4	<div><div></div></div> 30.2	<div><div></div></div> 16.8	<div><div></div></div> 50.2	<div><div></div></div> 54.8	<div><div></div></div> 32.4	<div><div></div></div> 17.4	<div><div></div></div> 23.0	<div><div></div></div> 24.2	<div><div></div></div> 41.6	<div><div></div></div> 31.2	<div><div></div></div> 20.4	<div><div></div></div> 22.4	<div><div></div></div> 21.6	<div><div></div></div> 2.6				
UK	(500)	<div><div></div></div> 66.6	<div><div></div></div> 32.2	<div><div></div></div> 15.6	<div><div></div></div> 49.8	<div><div></div></div> 53.6	<div><div></div></div> 26.8	<div><div></div></div> 14.8	<div><div></div></div> 17.2	<div><div></div></div> 24.6	<div><div></div></div> 45.0	<div><div></div></div> 28.2	<div><div></div></div> 19.2	<div><div></div></div> 21.0	<div><div></div></div> 19.2	<div><div></div></div> 2.4				
Australia	(500)	<div><div></div></div> 60.2	<div><div></div></div> 22.0	<div><div></div></div> 14.2	<div><div></div></div> 50.8	<div><div></div></div> 51.2	<div><div></div></div> 27.0	<div><div></div></div> 12.6	<div><div></div></div> 18.6	<div><div></div></div> 27.2	<div><div></div></div> 42.6	<div><div></div></div> 26.0	<div><div></div></div> 16.8	<div><div></div></div> 16.4	<div><div></div></div> 24.8	<div><div></div></div> 3.6				
China	(500)	<div><div></div></div> 41.2	<div><div></div></div> 46.0	<div><div></div></div> 30.6	<div><div></div></div> 34.2	<div><div></div></div> 53.0	<div><div></div></div> 34.8	<div><div></div></div> 29.6	<div><div></div></div> 28.0	<div><div></div></div> 30.4	<div><div></div></div> 32.8	<div><div></div></div> 27.6	<div><div></div></div> 20.4	<div><div></div></div> 17.2	<div><div></div></div> 18.6	<div><div></div></div> 0.4				
Finland	(500)	<div><div></div></div> 70.4	<div><div></div></div> 40.0	<div><div></div></div> 12.6	<div><div></div></div> 52.0	<div><div></div></div> 66.4	<div><div></div></div> 21.8	<div><div></div></div> 10.0	<div><div></div></div> 24.8	<div><div></div></div> 25.8	<div><div></div></div> 56.2	<div><div></div></div> 39.2	<div><div></div></div> 14.0	<div><div></div></div> 11.8	<div><div></div></div> 16.6	<div><div></div></div> 2.6				

Proactive involvement in treatment decisions

Intention for proactive involvement

- When asked whether they want to be proactively involved in the treatment decisions, the percentage of people who answered "I want to be proactively involved" (total of "I agree." + "I somewhat agree.") was **68.8% in Japan**, the lowest among the six countries. In the United States, the United Kingdom, and China, over 90% answered "I want to be proactively involved."

Q32 : Do you want to be proactively involved in the treatment decisions when you get sick or injured? Being proactively involved means being involved in decisions regarding treatment, after sharing your values and wishes with the healthcare professionals and getting a better understanding of the medical information provided by them.
(SA Question target : All)



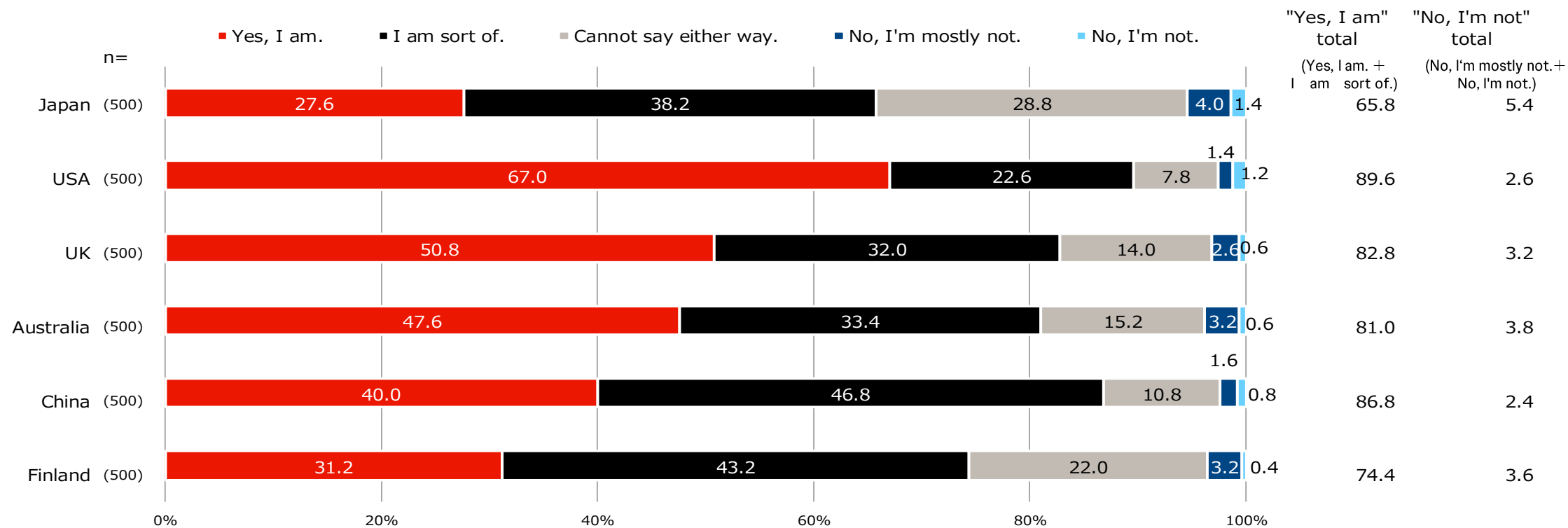
Proactive involvement in treatment decisions

Self-assessment of proactive involvement

- When asked whether they are able to be proactively involved in treatment decisions, the percentage of people who answered "I am able to be proactively involved" (total of "Yes, I am." + "I am sort of."), was **65.8% in Japan**, the lowest among the six countries. In the United States, China, the United Kingdom, and Australia, the percentage of people who answered "I am able to be proactively involved" (total of "Yes, I am." + "I am sort of."), was over 80%.

Q33 : Are you able to be proactively involved in the treatment decisions when you get sick or injured? Being proactively involved means being involved in decisions regarding treatment, after sharing your values and wishes with the healthcare professionals and getting a better understanding of the medical information provided by them.
(SA Question target : All)

Ability to take a proactive role in treatment decisions



Proactive involvement in treatment decisions

Benefits of proactive involvement

- When asked about the benefits of being proactively involved in treatment decisions, Japan recorded the lowest results among the six countries in all categories.
- "I can understand the diseases and treatments better," "I can feel more satisfied about the treatments and course of recovery," and "I can approach treatment with a positive attitude" were all given by roughly 50% in Japan, but "I can feel satisfied with my post-treatment life" and "I can have a fulfilling life while recovering" were both below 20%, roughly 10 points behind the other five countries.

Q34 : What do you think are the benefits of being proactively involved in the treatment decisions when you get sick or injured? Being proactively involved means being involved in decisions regarding treatment, after sharing your values and wishes with the healthcare professionals and getting a better understanding of the medical information provided by them.
(MA Question target : All)

Benefits of being proactively involved in treatment decisions

													(%)
	n=	I can feel more satisfied about the treatments and course of recovery.	I can understand the diseases and treatments better.	I can approach treatment with a positive attitude.	I think it will help me get quicker recovery.	I can have a fulfilling life while recovering.	I can feel satisfied with my post-treatment life.	It will increase my self-efficacy.	Other.				
Japan	(500)	<div></div> 48.8	<div></div> 54.2	<div></div> 48.6	<div></div> 33.4	<div></div> 15.6	<div></div> 17.6	<div></div> 14.6	<div></div> 7.2				
USA	(500)	<div></div> 71.2	<div></div> 57.2	<div></div> 55.6	<div></div> 39.4	<div></div> 31.0	<div></div> 33.2	<div></div> 24.8	<div></div> 3.6				
UK	(500)	<div></div> 60.2	<div></div> 65.2	<div></div> 54.0	<div></div> 35.0	<div></div> 23.6	<div></div> 24.8	<div></div> 23.2	<div></div> 2.6				
Australia	(500)	<div></div> 56.2	<div></div> 59.8	<div></div> 53.6	<div></div> 35.0	<div></div> 26.0	<div></div> 27.2	<div></div> 24.0	<div></div> 1.8				
China	(500)	<div></div> 50.2	<div></div> 58.8	<div></div> 65.0	<div></div> 54.4	<div></div> 36.4	<div></div> 38.4	<div></div> 25.2	<div></div> 0.0				
Finland	(500)	<div></div> 53.0	<div></div> 68.0	<div></div> 51.8	<div></div> 37.4	<div></div> 27.0	<div></div> 29.2	<div></div> 26.0	<div></div> 4.0				

What it takes to be proactively involved

- When asked what you think is necessary in order to be proactively involved in treatment decisions, Japan had the lowest results among the six countries in most categories.
- In Japan, the top three answers were "The ability to find information about things such as symptoms and methods of treatment for my disease/injury" (47.8%), "Having a primary care doctor" (41.2%), and "The ability to judge whether I have found correct information about things such as symptoms and methods of treatment for my disease/injury" (40.6%).

Q35 : What do you think is necessary in order to be proactively involved in the treatment decisions when you get sick or injured? Being proactively involved means being involved in decisions regarding treatment, after sharing your values and wishes with the healthcare professionals and getting a better understanding of the medical information provided by them. (MA Question target : All)

What it takes to be able to be proactively involved in treatment decisions

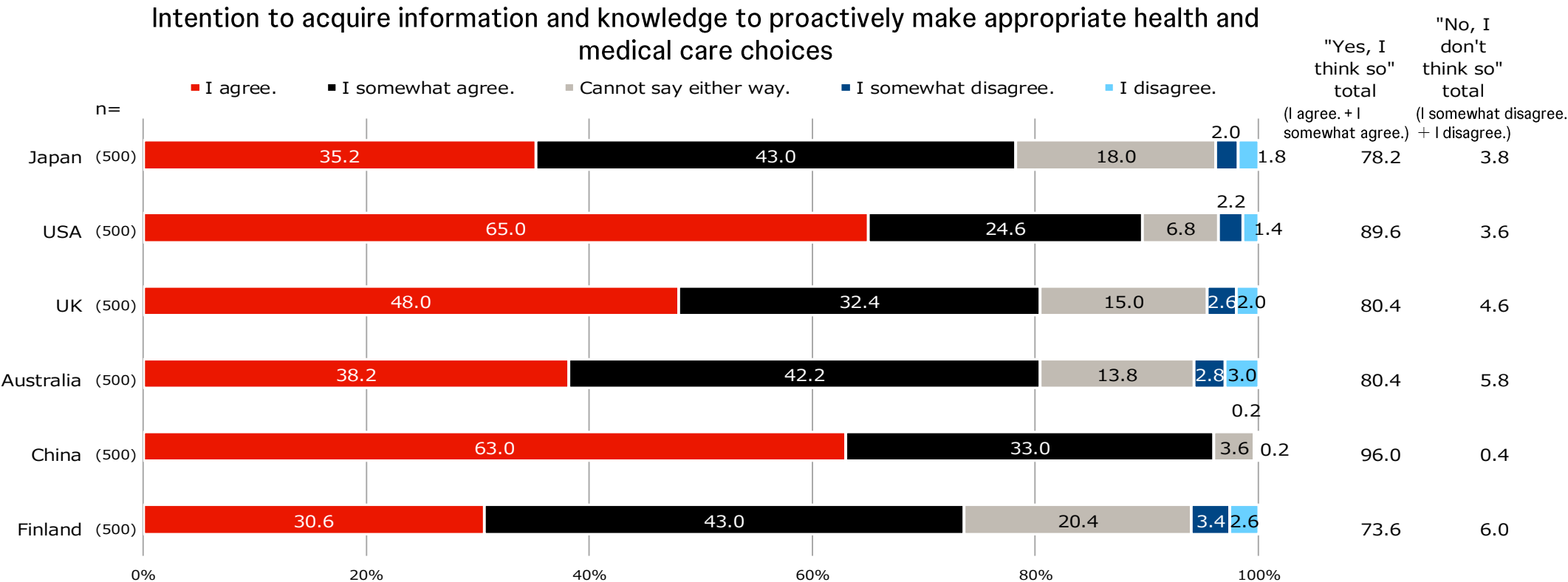
(%)																										
Other.																										
Widespread utilization of digital technology in medical institutions.																										
The ability to manage my own health using digital tools.																										
Systems and tools to support conversing with healthcare professionals such as doctors.																										
The ability to get a second opinion (consulting a different doctor's opinion) if needed.																										
The ability to talk to doctors about multiple treatment options.																										
The ability to converse with* healthcare professionals such as doctors. *Get deeper understanding of their (HCPs') explanations, ask them questions, and tell them what you think.																										
The ability to accurately describe my disease/injury's symptoms.																										
Having a primary care doctor.																										
Systems for discussing things such as symptoms or methods of treatment for my disease/injury using the Internet, etc.																										
The ability to interpret evidence about things such as symptoms and methods of treatment for my disease/injury.																										
The ability to judge whether I have found correct information about things such as symptoms and methods of treatment for my disease/injury.																										
The ability to find information about things such as symptoms and methods of treatment for my disease/injury.																										
n=																										
Japan (500)	<div></div>	47.8	<div></div>	40.6	<div></div>	21.2	<div></div>	22.6	<div></div>	41.2	<div></div>	32.6	<div></div>	23.4	<div></div>	19.4	<div></div>	30.6	<div></div>	11.4	<div></div>	10.2	<div></div>	10.8	<div></div>	7.2
USA (500)	<div></div>	63.4	<div></div>	45.4	<div></div>	40.6	<div></div>	28.0	<div></div>	51.4	<div></div>	39.6	<div></div>	38.4	<div></div>	43.6	<div></div>	35.0	<div></div>	22.2	<div></div>	20.2	<div></div>	10.0	<div></div>	2.6
UK (500)	<div></div>	58.2	<div></div>	45.8	<div></div>	43.0	<div></div>	27.8	<div></div>	49.6	<div></div>	42.2	<div></div>	40.6	<div></div>	39.8	<div></div>	34.2	<div></div>	16.6	<div></div>	15.6	<div></div>	8.4	<div></div>	2.0
Australia (500)	<div></div>	45.8	<div></div>	41.4	<div></div>	34.0	<div></div>	23.6	<div></div>	51.6	<div></div>	42.2	<div></div>	36.8	<div></div>	42.4	<div></div>	36.4	<div></div>	16.6	<div></div>	13.8	<div></div>	7.4	<div></div>	1.8
China (500)	<div></div>	48.6	<div></div>	46.6	<div></div>	44.6	<div></div>	42.0	<div></div>	13.6	<div></div>	44.8	<div></div>	42.2	<div></div>	31.4	<div></div>	28.4	<div></div>	27.0	<div></div>	22.0	<div></div>	9.4	<div></div>	0.0
Finland (500)	<div></div>	50.6	<div></div>	44.4	<div></div>	37.6	<div></div>	20.0	<div></div>	40.2	<div></div>	49.0	<div></div>	49.4	<div></div>	46.4	<div></div>	34.0	<div></div>	18.6	<div></div>	16.6	<div></div>	10.8	<div></div>	5.2

Acquisition of information and knowledge to proactively make appropriate health and medical care choices

Q44 : Do you want to acquire new information and knowledge, in order to proactively (intentionally) make appropriate health and medical care choices ?
(SA Question target : All)

Intention to acquire information and knowledge

- When asked "Do you want to acquire new information and knowledge, in order to proactively (intentionally) make appropriate health and medical care choices?", **78.2% of Japanese people answered that they thought so (total of "I agree." + "I somewhat agree.")**. The highest percentage was in China (96.0%), followed by the US (89.6%), and the UK and Australia (both 80.4%). Finland was lower than Japan at 73.6%.



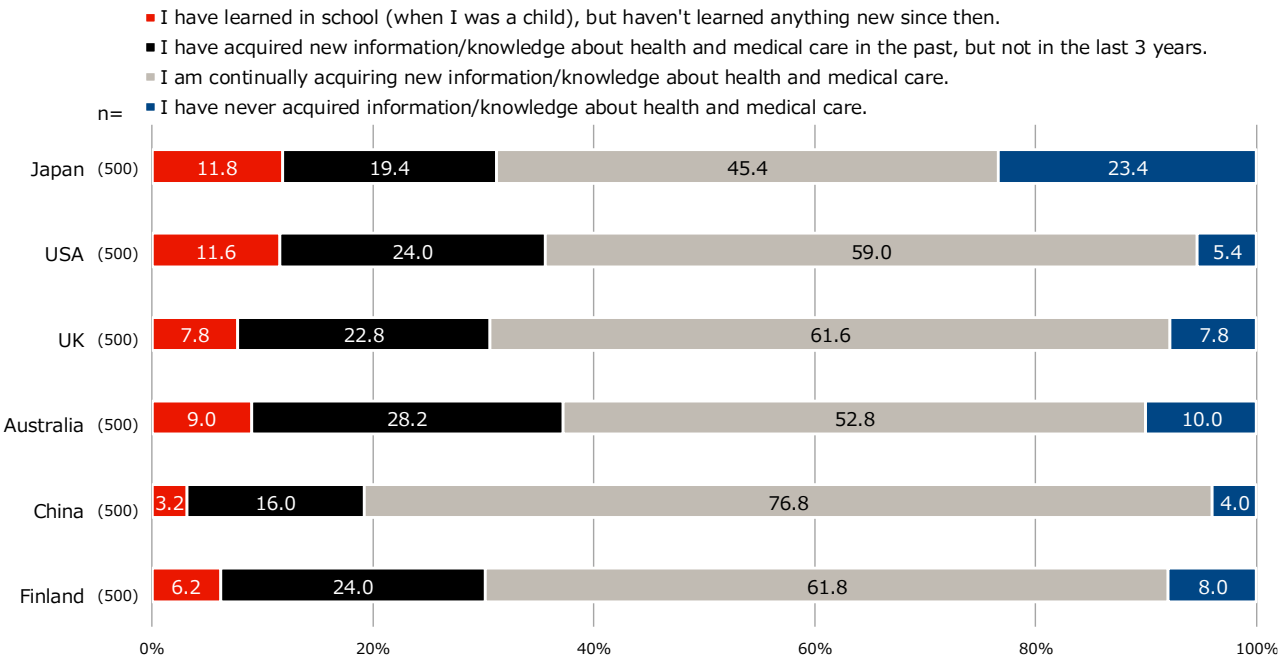
Acquisition of information and knowledge to proactively make appropriate health and medical care choices

Q45 : Are you acquiring new information and knowledge, in order to proactively (intentionally) make appropriate health and medical care choices?
(SA Question target : All)

Acquisition reality of information and knowledge

- In terms of acquiring new information and knowledge in order to proactively (intentionally) make appropriate health and medical care choices, 23.4% of people in Japan answered that they had "never acquired information/knowledge about health and medical care," the highest among the six countries. Meanwhile, **45.4% of people in Japan answered that they "I am continually acquiring new information/knowledge about health and medical care,"** the lowest among the six countries.

Acquisition reality of information and knowledge to proactively make appropriate health and medical care choices

































Respondent demographics

Experience of hospitalization and surgery (personal)

Q47-1 : Have you or any members of your family undergone surgery or been hospitalized in the last five years?
Please select all that apply to you and your family.
You yourself.
(MA Question target : All)































Experience of hospitalization and surgery (personal)

							(%)
n=		Have undergone surgery.	Have been hospitalized.	Have been seeing a doctor regularly (for periodic checks and tests for diseases).	Have been seeing a doctor regularly (for treatment).	None of the above.	
Japan	(500)	 21.0	 23.2	 32.0	 36.8	 45.6	
USA	(500)	 24.4	 32.8	 28.0	 19.2	 34.6	
UK	(500)	 18.2	 20.8	 21.2	 14.2	 50.2	
Australia	(500)	 28.2	 26.0	 27.6	 18.2	 41.0	
China	(500)	 13.4	 20.8	 54.0	 20.2	 31.4	
Finland	(500)	 33.6	 28.8	 31.2	 18.8	 34.4	

Experience of hospitalization and surgery (family)

Q47-2 : Have you or any members of your family undergone surgery or been hospitalized in the last five years?
Please select all that apply to you and your family.
Members of your family.
(MA Question target : All)

Experience of hospitalization and surgery (family)

							n=		(%)
		Have undergone surgery.	Have been hospitalized.	Have been seeing a doctor regularly (for periodic checks and tests for diseases).	Have been seeing a doctor regularly (for treatment).	None of the above.			
Japan	(500)	 21.8	 26.6	 33.6	 31.8	 47.6			
USA	(500)	 22.8	 30.6	 30.0	 24.8	 36.2			
UK	(500)	 25.0	 29.6	 26.4	 20.8	 42.6			
Australia	(500)	 30.4	 29.6	 27.2	 21.8	 35.6			
China	(500)	 11.2	 26.4	 52.4	 26.6	 25.8			
Finland	(500)	 33.4	 30.2	 25.4	 20.0	 36.0			

Contact

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